

23, 2006. On or about August 29, 2006, Hartford received a copy of the Complaint from the Delaware Insurance Commissioner.

3. The Complaint and the disclosures attached thereto constitute all process, pleadings, and orders received by Hartford in this action.

4. This Notice is timely under 28 U.S.C. § 1446(b), it being filed within thirty (30) days of the service of plaintiffs' Complaint on August 23, 2006.

5. The basis for removal is diversity of citizenship. As averred below, the present action is a civil action over which this Court has original jurisdiction under the provisions of the United States Code governing diversity jurisdiction. 28 U.S.C. § 1332. Hence, this is a civil action which may be removed to this Court pursuant to the provisions of 28 U.S.C. § 1441(a).

(a) Plaintiff John W. Keiser has alleged in his Complaint that he is an adult individual residing with his guardian, Laurie Keiser, at 181 Maryland Drive, Woodruff, South Carolina 29388. Thus, Plaintiff is a citizen of South Carolina for purposes of determining the existence of diversity of citizenship under 28 U.S.C. § 1332.

(b) Defendant Hartford was, at the time this action was commenced, and is; a corporation organized and existing under the laws of the State of Connecticut, with its principal place of business located at 3001 Eighth Avenue, Hartford Connecticut 06115. Thus, Hartford is a citizen of Connecticut for purposes of determining the existence of diversity of citizenship under 28 U.S.C. § 1332.

(c) Therefore, there is complete diversity among the parties.

(d) The plaintiff's Complaint alleges damages in the amount of \$642,037.31 for unpaid medical expenses. Thus, the amount in controversy, exclusive of interest and costs,

exceeds \$75,000 in the present action. The plaintiff also purports to state causes of action for bad faith and breach of contract and seeks to recover an unspecified sum for future medical expenses plus costs, statutory interest and pre- and post-judgment interest, as well as punitive damages, costs, and attorney's fees for the present action.

6. Pursuant to 28 U.S.C. § 1441(a), the United States District Court for the District of Delaware is the proper venue for removal because Kent County, Delaware, the place where this action is pending, is located within the District of Delaware.

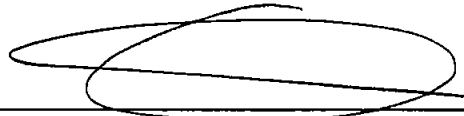
7. Hartford will give written notice of the filing of this Notice of Removal to the plaintiff and to the Clerk of the Superior Court of the State of Delaware in and for Kent County as required by 28 U.S.C. § 1446(d).

8. Attached to this Notice as Exhibit A are copies of all process, pleadings and orders filed in the state court record through this date.

WHEREFORE, Defendant Hartford, having met all of the requirements for removal under 28 U.S.C. §§ 1441 and 1446, including all jurisdictional requirements established by 28 U.S.C. § 1332, hereby provides Notice of its removal of the above-captioned action to the United States District Court for the District of Delaware and requests that this action proceed in this Court.

Dated: September 21, 2006

Respectfully submitted,



William M. Kelleher (I.D. No. 3961)
BALLARD SPAHR ANDREWS & INGERSOLL, LLP
919 N. Market Street, 12th Floor
Wilmington, DE 19801-3034
Telephone: (302) 242-4465

Attorney for Defendant,
Hartford Underwriters Insurance Company

OF COUNSEL:
BALLARD SPAHR
ANDREWS & INGERSOLL, LLP
John C. Grugan
Diana L. Spagnuolo
1735 Market Street, 51st Floor
Philadelphia, Pennsylvania 19103-7599
Telephone: (215) 665.8500

CERTIFICATE OF SERVICE

I, William M. Kelleher, hereby certify that on this 21st day of September, 2006, I have caused a true and correct copy of the attached Notice of Removal, with Exhibit A, to be served on the following counsel and the Prothonotary at the addresses listed below:

Opposing Counsel:

Jeffrey J. Clark, Esq.
SCHMITTINGER & RODRIGUEZ, P.A.
414 South State Street, P.O. Box 497
Dover, DE 19903
(302) 674-0140

Mode of Service: Via first class mail

Prothonotary: Prothonotary - Kent County
Kent County Courthouse
Kent County, Delaware

Mode of Service: Via electronic filing

Dated: September 21, 2006



William M. Kelleher (No. 3961)

EXHIBIT 1

8/23/06 18674 25.

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS
INSURANCE COMPANY,
a foreign corporation,

Defendant.

C.A. No.:

NON-ARBITRATION CASE

JURY TRIAL DEMANDED

PRAECIPE

TO: Lisa Lowman, Prothonotary
Kent County Courthouse
Dover, DE 19901

PLEASE DOCKET the attached Complaint and Related Pleadings and issue Summons to the Sheriff for Kent County directing him to serve the same with two (2) copies of the Complaint and Related Pleadings upon the Defendant, Hartford Underwriters Insurance Company, a foreign corporation authorized to transact insurance business in the State of Delaware, by serving the Insurance Commissioner of the State of Delaware at his office in Dover, Delaware, pursuant to 18 Del. C. §§ 524 and 525.

ENCLOSED IS THE COURT FILING FEE OF \$175 AND THE RELATED FEES FOR SERVICES IN THIS MATTER.

SCHMITTINGER & RODRIGUEZ, P.A.

By:

JEFFREY J CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 South State Street
P.O. Box 497
Dover, Delaware 19903
(302) 674-0140
Attorney for Plaintiff

DATED: 7/27/06

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS
INSURANCE COMPANY,
a foreign corporation,

Defendant.

C.A. No.:

NON-ARBITRATION CASE

JURY TRIAL DEMANDED

SUMMONS

06 C-07-052 (JTV)

THE STATE OF DELAWARE
TO THE SHERIFF OF KENT COUNTY:
YOU ARE COMMANDED:

To summon the above-named Defendant, HARTFORD UNDERWRITERS INSURANCE COMPANY, so that, within 20 days after service hereof, Defendant, exclusive of the day of service, shall serve upon JEFFREY J CLARK, ESQUIRE, Plaintiff's attorney, whose address is 414 South State Street, Dover, Delaware 19901 and Answer to the Complaint (and, if the complaint contains a specific notation requiring Defendant to answer any or all allegations of the complaint by affidavit, an affidavit of defense).

To serve upon Defendant a copy hereof and of the Complaint (and of the affidavit of demand if any has been filed by Plaintiff).

Dated:

8/18/06

PROTHONOTARY

Per Deputy

TO THE ABOVE NAMED DEFENDANT:

In case of you failure, within 20 days after service hereof upon you, exclusive of the day of service, to serve on Plaintiff's attorney named above an Answer to the Complaint (and, if the complaint contains a specific notation requiring the Defendant to answer any or all allegations of the complaint by affidavit, an affidavit of defense), judgment by default will be rendered against you for the relief demanded in the complaint (or in the affidavit of demand, if any).

PROTHONOTARY

Per Deputy

2006 AUG 19 2:11 PM
SHERIFF'S OFFICE
KENT COUNTY, DEL.

SUPERIOR COURT CIVIL CASE INFORMATION STATEMENT (CIS)

COUNTY: N (K) SCIVIL ACTION NUMBER: 06C-07-052 JTVCIVIL CASE CODE: CDBTCIVIL CASE TYPE: DEBT/BREACH OF CONTRACT
(SEE REVERSE SIDE FOR CODE AND TYPE)

CAPTION:	NAME AND STATUS OF PARTY FILING DOCUMENT:
JOHN W. KEISER,	John W. Keiser, by his Guardian Ad Litem
by his Guardian Ad Litem, LAURIE KEISER,	Laurie Keiser, Plaintiff.
Plaintiff,	
v.	DOCUMENT TYPE: (E.G., COMPLAINT; ANSWER WITH COUNTERCLAIM)
HARTFORD UNDERWRITERS	Complaint and Related Pleadings
INSURANCE COMPANY,	
a foreign corporation,	ARBITRATION _____ NON-ARBITRATION <u>X</u> (CERTIFICATE OF VALUE MAY BE REQUIRED)
Defendant.	JURY DEMAND <u>X</u> YES _____ NO _____
	TRACK ASSIGNMENT REQUESTED: (CIRCLE ONE)
	EXPEDITED <u>STANDARD</u> COMPLEX
ATTORNEY NAME(S):	IDENTIFY ANY RELATED CASES NOW PENDING IN THE SUPERIOR COURT BY CAPTION AND CIVIL ACTION NUMBER INCLUDING JUDGE'S INITIALS
JEFFREY J CLARK, ESQ.	
DELAWARE BAR ID #3485	
FIRM NAME:	
SCHMITTINGER & RODRIGUEZ, P.A.	
ADDRESS:	EXPLAIN THE RELATIONSHIP(S):
414 SOUTH STATE STREET	
P.O. BOX 497	
DOVER, DE 19903-0497	
TELEPHONE NUMBER:	OTHER UNUSUAL ISSUES THAT AFFECT CASE MANAGEMENT:
302-674-0140	
FAX NUMBER:	
302-674-1830	
E-MAIL ADDRESS:	
jclark@schmittrod.com	(IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH PAGES)

THE PROTHONOTARY WILL NOT PROCESS THE COMPLAINT, ANSWER OR FIRST RESPONSIVE PLEADING IN THIS MATTER FOR SERVICES UNTIL THE CASE INFORMATION STATEMENT (CIS) IS FILED. THE FAILURE TO FILE THE CIS AND TO HAVE THE PLEADING PROCESSED FOR SERVICE MAY RESULT IN THE DISMISSAL OF THE COMPLAINT OR MAY RESULT IN THE ANSWER OR FIRST RESPONSIVE PLEADING BEING STRICKEN.

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,	*	C.A. No.:
by his Guardian Ad Litem,	*	
LAURIE KEISER,	*	NON-ARBITRATION CASE
	*	
Plaintiff,	*	
	*	JURY TRIAL DEMANDED
v.	*	
	*	
HARTFORD UNDERWRITERS	*	
INSURANCE COMPANY,	*	
a foreign corporation,	*	
	*	
Defendant.	*	<u>COMPLAINT</u>

Count I - Breach of Contract

1. Plaintiff, John W. Keiser, is a resident of the State of South Carolina, who currently resides with his guardian, Laurie Keiser, at 181 Maryland Drive, P.O. Box 364, Woodruff, South Carolina 29388.

2. Plaintiff John W. Keiser, a mentally disabled adult,
~~(date of birth [REDACTED], 1983) and is the son of Laurie Keiser.~~

Pursuant to the Motion of Plaintiff Laurie Keiser, under Superior Court Civil Rule 17(c), filed simultaneously herewith, Laurie Keiser is the guardian ad litem of her son, John W. Keiser.

3. Defendant Hartford Underwriters Insurance Company ("Defendant"), is a foreign corporation authorized to transact insurance business in the State of Delaware and has designated the Insurance Commissioner of the State of Delaware as its agent for service of process pursuant to 18 Del. C. §§524 and 525. If corporate existence or proper identity is denied, then Defendant National Insurance Company, must do so in accordance with 10 Del. C. §3915.

4. As of December 18, 2004 and at all times pertinent

hereto, Defendant had issued an insurance policy to Thomas Mehrtens, d/b/a Appliance Refrigeration, Heating & Air Conditioning, insuring a 2002 Pontiac Firebird, said insurance policy number being 44 UEC GF0579.

5. The aforementioned insurance policy provided Delaware personal injury protection ("PIP") coverage for the benefit of Plaintiff John W. Keiser, as an insured under this policy and under applicable Delaware law.

6. On December 18, 2004 Plaintiff John W. Keiser was injured in a motor vehicle accident. This accident was promptly reported to Defendant and is being adjusted under claim number YCH AL 38734.

7. The aforementioned insurance policy issued by Defendant to Thomas Mehrtens, d/b/a Appliance Refrigeration, Heating & Air Conditioning, provided PIP coverage in accordance with 21 Del.C §2118, thereby entitling Plaintiff to payment of reasonable and necessary medical ~~expenses~~ incurred as a result of injuries

stemming from this accident.

8. Plaintiff John W. Keiser has submitted to Defendant reasonable and necessary medical expenses incurred as a result of injuries he sustained in this motor vehicle collision.

9. To date, Defendant has wrongfully refused to pay these medical expenses and has ignored all requests to render payment to the medical providers. These unpaid medical expenses to date total \$642,037.31 and are more particularly identified in Exhibit "A", attached hereto, and incorporated herein.

10. Defendant's refusal to pay the aforementioned medical expenses is in breach of its contractual obligations to Plaintiff John W. Keiser under the aforementioned insurance policy.

11. Defendant continues to refuse to pay the aforementioned medical bills, which are reasonable and necessary and proximately related to the aforementioned accident.

12. As a direct and proximate result of Defendant's refusal to pay the aforementioned medical expenses, Plaintiff John W. Keiser has sustained unpaid medical expenses and will incur future medical expenses during the applicable two year PIP coverage period.

13. Plaintiff John W. Keiser is contractually entitled to recover for the aforementioned unpaid medical expenses and any future medical expenses sustained as a proximate result of the aforementioned motor vehicle accident under 21 Del.C §2118 and under the aforementioned insurance policy.

WHEREFORE, Plaintiff John W. Keiser, demands judgment against Defendant Hartford Underwriters Insurance Company for the unpaid medical expenses, arising from this personal injury protection claim, any future medical expenses incurred within the two year PIP period, together with costs, and interest as authorized by 21 Del.C §2118B, and pre and post-judgment interest.

Count II - Bad Faith

14. Plaintiff John W. Keiser realleges paragraphs 1 through 13 in their entirety and incorporate the same herein by this reference.

15. Defendant has arbitrarily denied payment of these medical expenses without any reasonable basis and has taken such action in bad faith.

16. As a direct and proximate result of Defendant's aforesaid actions, Plaintiff John W. Keiser has sustained unpaid medical expenses, financial hardship, emotional distress and

humiliation.

17. Defendants action, also violates 21 Del. C. § 2118B as despite timely submission, Defendant did not give its position nor make payment regarding Plaintiffs claims within the required 30 days.

WHEREFORE, Plaintiff John W. Keiser, demands judgment against Defendant Hartford Underwriters Insurance Company for compensatory damages, punitive damages, costs, pre and post-judgment interest, statutory interest, and attorney's fees pursuant to 21 Del. C. §2118B.

SCHMITTINGER & RODRIGUEZ, P.A.

By: 

JEFFREY J. CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 South State Street
P.O. Box 497
Dover, Delaware 19903
(302) 674-0140
Attorney for Plaintiff

DATED: 7/31/06
JJC:

UNPAID MEDICAL EXPENSES FOR JOHN W. KEISER

1.	Christiana Hospital 12/18/04 - 8/11/05	\$270,743.66
2.	Doctors For Emergency Service 12/18/04	\$ 1,064.00
3.	Anesthesia Services, PA 12/18/04 - 5/10/05	\$ 11,480.00
4.	Neurosurgery Consultants, PA 12/18/04 - 5/10/05	\$ 30,324.00
5.	X-Ray Associates 12/18/04 - 5/13/05	\$ 7,827.00
6.	Christiana Imaging Center 1/8/05	\$ 497.00
7.	Physiatrist Associates, P.A. 1/17/05 - 5/17/05	\$ 370.00
8.	Infectious Disease Associates 1/29/05 - 2/11/05	\$ 913.00
9.	Stevens Television & Telephone Service 2/11/05 - 5/4/05	\$ 242.50
10.	Bryn Mawr Hospital 2/14/05 - 5/4/05	\$293,066.61
11.	Paoli Memorial Hospital 2/17/05 - 7/07/05	\$ 10,560.00
12.	Radiology Assoc. Of the Mainline 2/17/05 - 7/7/05	\$ 1,202.00
13.	Bryn Mawr Imaging Center 2/23/05 - 4/27/05	\$ 4,425.00
14.	Transcare ML, Inc. 3/28/05	\$ 1,102.00
15.	Pathology DCLP 4/20/05	\$ 108.78
16.	TMS 6/7/05	\$ 10.30
17.	Kent Diagnostic Radiology 8/22/05	\$ 522.00

18.	Kent General Hospital 8/22/05	\$	5.00
19.	Prescriptions 8/24/05 - 6/24/06	\$	3,559.31
20.	Family Practice of Woodruff 12/22/05 - 03/02/06	\$	371.15
21.	Upstate Neurology 1/5/06 - 3/2/06	\$	368.00
22.	Greenville Memorial Hospital 02/10/06 - 3/15/06	\$	1,998.70
23.	South Eastern Neurosurgical & Spine 03/22/06	\$	189.00
24.	Upstate Medical Rehabilitation 04/21/06 - 06/23/06	\$	548.00
25.	Hanger Prosthetics & Orthotics 5/2/06	\$	132.30
26.	Jervey Eye Group 06/16/06	\$	258.00
27.	Misc. Supplies, etc. 06/19/06	\$	<u>150.00</u>
TOTAL UNPAID MEDICAL EXPENSES:			\$642,037.31

EXHIBIT "A"

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS
INSURANCE COMPANY,
a foreign corporation,

Defendant.

* C.A. No.:
*
* NON-ARBITRATION CASE
*
* JURY TRIAL DEMANDED
*
*
*
*
*
*
*
*

CERTIFICATE OF VALUE

I, Jeffrey J Clark, Esquire, attorney for Plaintiff, hereby
certify, in my opinion, that the sum of all damages due Plaintiff
is in excess of \$100,000.00, exclusive of costs and interest.

SCHMITTINGER & RODRIGUEZ, P.A.

BY: 

JEFFREY J CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 South State Street
P.O. Box 497
Dover, Delaware 19903
(302) 674-0140
Attorney for Plaintiff

DATED: 7/27/06
JJC:mj

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,	*	C.A. No.:
by his Guardian Ad Litem,	*	
LAURIE KEISER,	*	NON-ARBITRATION CASE
	*	
Plaintiff,	*	
	*	JURY TRIAL DEMANDED
v.	*	
	*	
HARTFORD UNDERWRITERS	*	
INSURANCE COMPANY,	*	
a foreign corporation,	*	
	*	PLAINTIFF'S ANSWERS TO
Defendant.	*	FORM 30 INTERROGATORIES

Q. 1. Give the name and present or last known residential and employment address and telephone number of each eyewitness to the incident which is the subject of the litigation.

A. In addition to the parties to this matter, Thomas R. Mehrtens, Jr., Sussex Correctional Institution, Building: Medium, Tier: D, P.O. Box 500, Georgetown, DE 19947, SBI No.: 00353328 and Orville Mosley, Jr., 3845 Seven Hickories Road, Dover, DE 19901, (302) 734-8391.

Q. 2. Give the name and present or last known residential and employment address and telephone number of each person who has knowledge of the facts relating to the litigation.

A. In addition to the persons identified in the previous interrogatory answer: personnel of Hartford Insurance Company, 100 Enterprise Drive, P.O. Box 2000, Rockaway, NJ 07866, (800) 766-9119; personnel of Delaware State Police, including Tfc. Alphonso Jones, Cpl. Brian C. Talley, Tfc. Angela Garnsey, Sgt. Jahn Hitchens; personnel of Anesthesia Services, P.A., P.O. Box 827909,

Philadelphia, PA 19182, (800) 222-1442; personnel of Neurosurgery Consultants, PA, C 79 Omega Drive, Newark, DE 19713, (302) 738-9145; personnel of Bryn Mawr Hospital, P.O. Box 8500, Philadelphia, PA 19178, (610) 658-6060; personnel of Bryn Mawr Imaging Center, P.O. Box 7780-1728, Philadelphia, PA 19182-0217, (610) 459-3456; personnel of Christiana Care Health Services, P.O. Box 2653, Wilmington, DE 19805, (302) 623-7000; personnel of Christiana Hospital, Ogletown-Stanton Road, Newark, DE 19718, (302) 733-1000; personnel of Christiana Imaging Center, P.O. Box 827991, Philadelphia, PA 19182; personnel of Doctors for Emergency Service, P.O. Box 3048, Wilmington, DE 19804, (302) 224-5678; personnel of Family Practice of Woodruff, specifically James Gragg, M.D., 246 Pearson Street, Woodruff, SC 29388, (864) 278-6031; personnel of Greenville Hospital, 255 Enterprise Boulevard, Suite 210, Greenville, SC 29615, (864) 454-8611; personnel of Hanger Prosthetics & Orthotics, 2 Butternut Drive, Greenville, SC 29605, (864) 232-0871; personnel of Infectious Disease Associates, Omega Professional Center, J 32 Omega Drive, Newark, DE 19713, (302) 368-3872; personnel of Jervey Eye Group, 1 Doctors Drive, Greenville, SC 29605, (864) 271-3354; personnel of Kent Diagnostic Radiology, 755 Walker Road, Dover, DE 19903, (302) 674-2202; personnel of Kent General Hospital, 640 S. State Street, Dover, DE 19901, (302) 744-7081; personnel of Upstate Medical Rehabilitation, 1003 Grove Road, Greenville, SC 29605, (864) 232-8417; personnel of Paoli Memorial Hospital, P.O. Box 8500-4875, Philadelphia, PA 19178-4875, (610) 658-6060; personnel of Pathology DCLP, P.O. Box 12210, Wilmington, DE 19850, (302) 731

8956; personnel of Physiatrist Associates, P.A., 4735 Ogletown-Stanton Road, Newark, DE 19713, (302) 623-4144; personnel of Radiology Associates of the Mainline, P.O. Box 225, Paoli, PA 19301, (800) 347-4219; personnel of South Eastern Neurosurgical & Spine, 20 Medical Ridge Drive, Greenville, SC 29605, (864) 295-3600; personnel of Stevens Television & Telephone Service, 520 Orchard Lane, Feasterville, PA 19053, (215) 364-4714; personnel of TMS, 5792 Widewaters Parkway, Dewitt, NY 13214, (888) 262-0922; personnel of Transcare ML, Inc., P.O. Box 15146, Newark, NJ 07192-5146, (800) 794-7936; personnel of Upstate Neurology, 1190B Haywood Road, Greenville, SC 29615, (864) 284-9974 and personnel of X-Ray Associates, 7234 Lancaster Pike, Suite 301B, Hockessin, DE 19707, (302) 234-5800.

Q. 3. Give the names of all persons who have been interviewed in connection with the above litigation, including the names and present or last known residential and employment addresses and telephone numbers of the persons who made said interviews and the names and present or last known residential and employment addresses and telephone numbers of persons who have the original and copies of the interview.

A. None other than reports and records received from Plaintiff's healthcare providers.

Q. 4. Identify all photographs, diagrams or other representations made in connection with the matter in litigation, giving the name and present or last known residential and employment address and telephone number of the person having the original and copies thereof. (In lieu thereof, a copy can be

attached).

A. Plaintiff is in possession of 23 photographs of Defendant's vehicle, 16 photographs depicting Plaintiff John W. Keiser's injuries and, attached hereto, is the fatal accident police report with diagram.

Q. 5. Give the name, professional address and telephone number of all expert witnesses presently retained by the party together with the dates of any written opinions prepared by said expert. If an expert is not presently retained, describe by type the experts whom the party expects to retain in connection with the litigation.

A. No expert witnesses have been retained to date, but it is anticipated that those health care providers named in answer to Interrogatory No. 2 will be retained to testify regarding the treatment, diagnosis, and prognosis of Plaintiff's injuries.

Q. 6. Give a brief description of any insurance policy, including excess coverage, that is or may be applicable to the litigation, including:

- (a) The name and address of all companies insuring the risk;
- (b) The policy number(s);
- (c) The type of insurance;
- (d) The amounts of primary, secondary and excess coverage.

A. (a) Hartford Insurance,
100 Enterprise Drive, P.O. Box 2000,
Rockaway, NJ 07866. (800) 766-9119;

- (b) Claim No. YCH AL 38734;
- (c) Automobile insurance;
- (d) Amount of Personal Injury Protection (PIP)
coverage: To be determined.

Q. 7. Give the name, professional address and telephone number of all physicians, chiropractors, psychologists and physical therapists who have examined or treated you at any time during the ten year period immediately prior to the date of the incident at issue in this litigation.

A. Dr. Walter B. Omans, Bradford Street, Dover, DE 19901, no longer in practice and Kent General Hospital, 640 S. State Street, Dover, DE 19901, (302) 744-7081.

SCHMITTINGER & RODRIGUEZ, P.A.

BY: 

JEFFREY J CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 S. State Street
P.O. Box 497
Dover, Delaware 19903-0497
(302) 674-0140
Attorney for Plaintiff

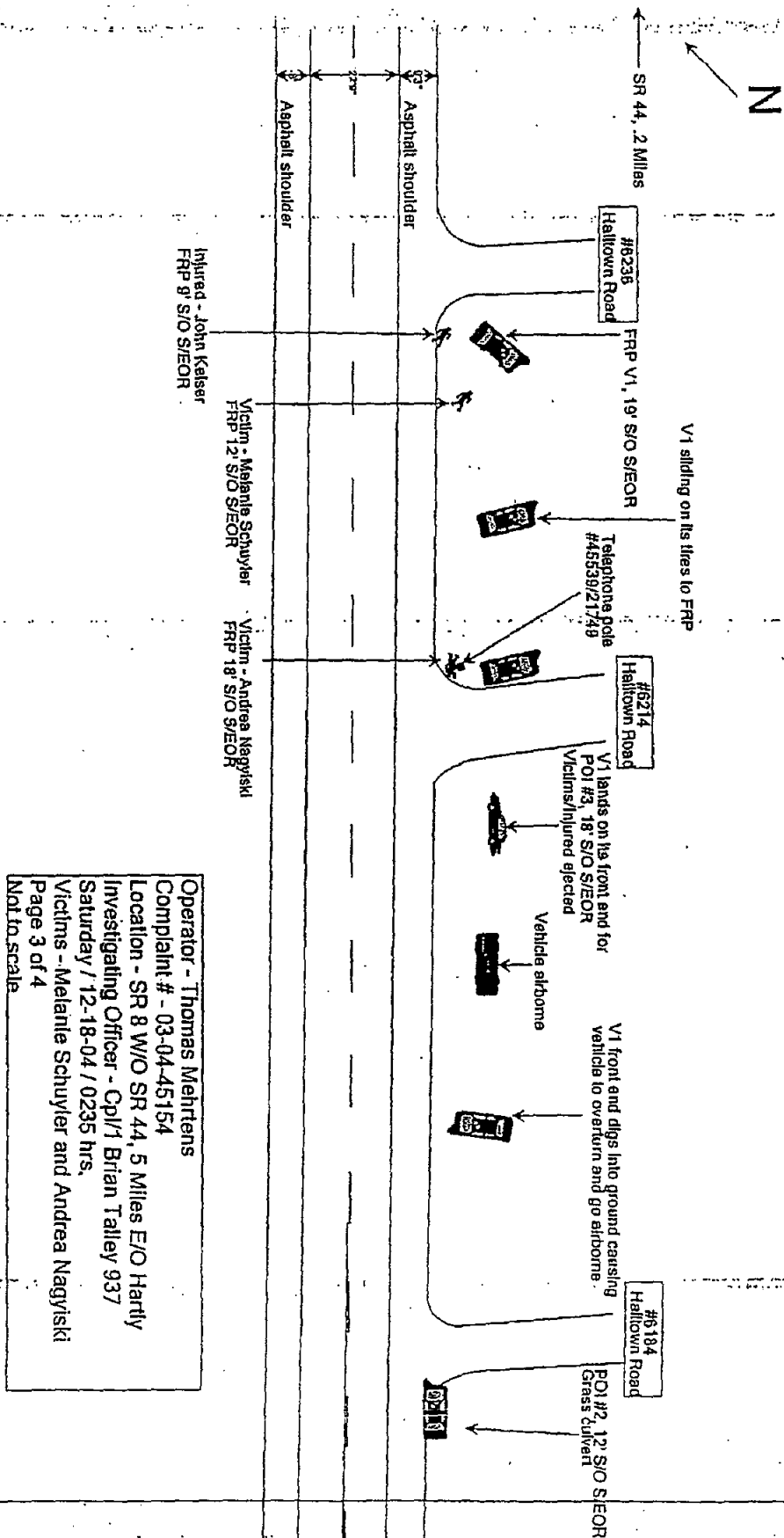
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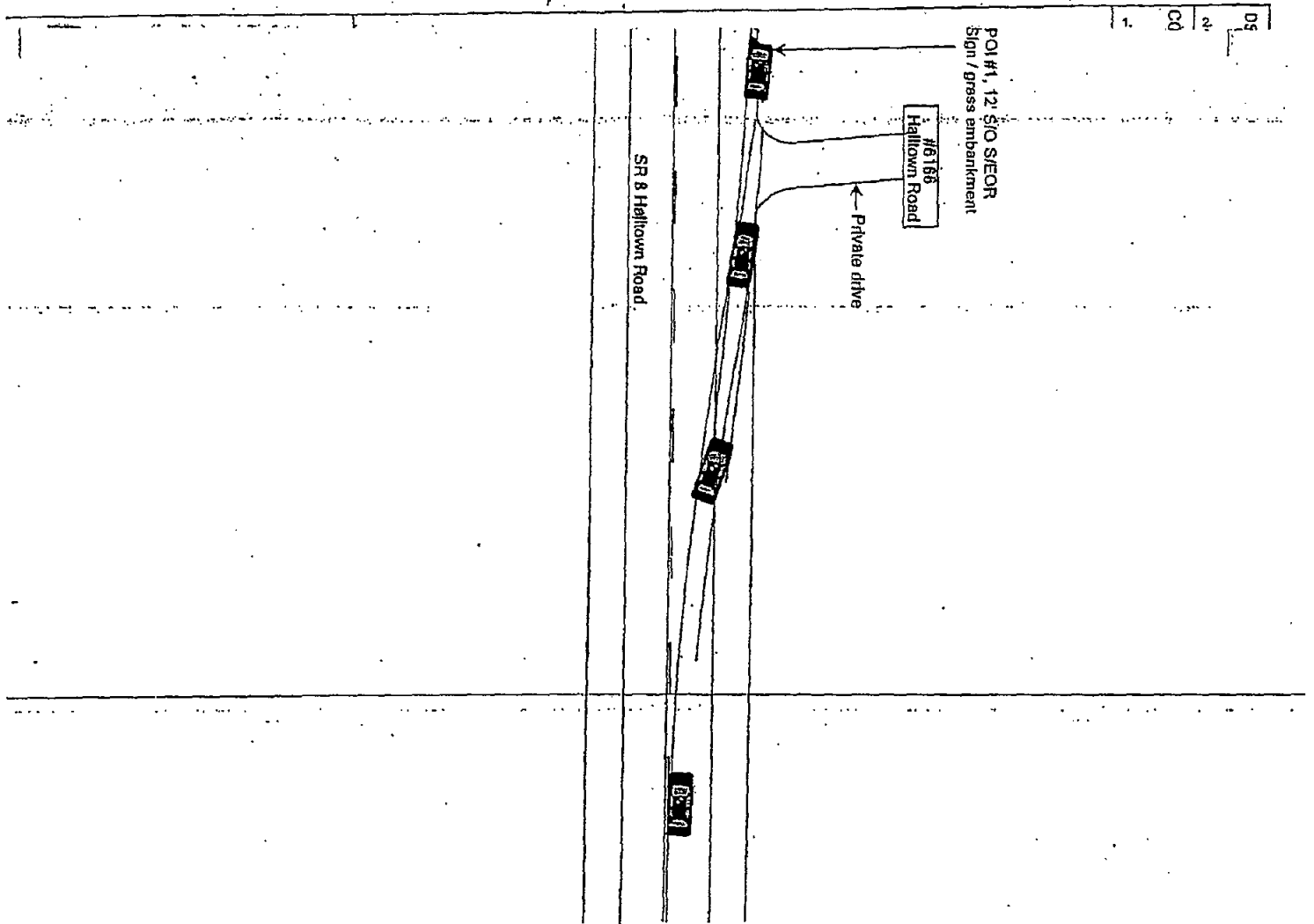
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1. MONTH YEAR DAY TIME 10/18/04 02:37		2. DATE 10/18/04		3. TIME OF OCCURRENCE 02:37		4. NOTIFIED 02:37		5. ARRIVED 02:49		6. GRID 082-214	
7. SECTOR 33		8. LIGHT CONDITION 21		9. WEATHER CONDITION 22		10. SURFACE 27		11. TRAFFIC CONTROL 35		12. FUNCTION PROPER 1	
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72. DISREGARD TRAFFIC SIGNAL 72											
73. DISREGARD TRAFFIC SIGNAL 73											
74. DISREGARD TRAFFIC SIGNAL 74											
75. DISREGARD TRAFFIC SIGNAL 75											
76. DISREGARD TRAFFIC SIGNAL 76											
77. DISREGARD TRAFFIC SIGNAL 77											
78. DISREGARD TRAFFIC SIGNAL 78											
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81. DISREGARD TRAFFIC SIGNAL 81											
82. DISREGARD TRAFFIC SIGNAL 82											
83. DISREGARD TRAFFIC SIGNAL 83											
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85. DISREGARD TRAFFIC SIGNAL 85											
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87. DISREGARD TRAFFIC SIGNAL 87											
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91. DISREGARD TRAFFIC SIGNAL 91											
92. DISREGARD TRAFFIC SIGNAL 92											
93. DISREGARD TRAFFIC SIGNAL 93											
94. DISREGARD TRAFFIC SIGNAL 94											
95. DISREGARD TRAFFIC SIGNAL 95											
96. DISREGARD TRAFFIC SIGNAL 96											
97. DISREGARD TRAFFIC SIGNAL 97											
98. DISREGARD TRAFFIC SIGNAL 98											
99. DISREGARD TRAFFIC SIGNAL 99											
100. DISREGARD TRAFFIC SIGNAL 100											

<input checked="" type="checkbox"/> 60. CONTINUATION <input type="checkbox"/> 80. SUPPLEMENT INITIAL REPORT DATE 12 18 04 OPERATOR #1 Mehrtens, Thomas R OPERATOR #2		STATE OF DELAWARE UNIFORM TRAFFIC COLLISION REPORT INJURY INFORMATION										1. COMPLAINT NO. 03-04-45154		2. DSP HQ. NO. (LEAVE BLANK) 0010	
		DSP 3													
		TROOP/DEPARTMENT													
61. NAME: LAST FIRST ML		69. SEX	70. AGE	71. VEH#	72. NO. IN VEH	73. SEAT#	74. STATU S	75. FIRST AID	76. INJURY CLASS	77. EJECT	78-1. RESTR. AINT	78-2. RESTR. PROPR	78-3. PASSIV RESTR.		
Mehrtens, Thomas R		M	22	1	4	1	66	72	75	80	85	2	6		
62. ADDRESS		3034 South State St. Camden, DE 19934													
63. PHONE		(302) 363-3946													
64. INJURIES		Abrasions to the forehead													
65. EXAMINED BY DOCTOR:		66. REMOVED		97		67. REMOVED TO Kent General Hosp.								68. HOSPITAL DISPOSITION Treated & Rele	
61. NAME: LAST FIRST ML		69. SEX	70. AGE	71. VEH#	72. NO. IN VEH	73. SEAT#	74. STATU S	75. FIRST AID	76. INJURY CLASS	77. EJECT	78-1. RESTR. AINT	78-2. RESTR. PROPR	78-3. PASSIV RESTR.		
Keiser John W		M	21	1	4	4	67	72	76	79	85	2	6		
62. ADDRESS		83 Brittney Lane Hartly DE 19953													
63. PHONE		(302) 492-1857													
64. INJURIES		Multiple Trauma													
65. EXAMINED BY DOCTOR:		66. REMOVED		99		67. REMOVED TO Christiana Hospital								68. HOSPITAL DISPOSITION Treated & Admi	
61. NAME: LAST FIRST ML		69. SEX	70. AGE	71. VEH#	72. NO. IN VEH	73. SEAT#	74. STATU S	75. FIRST AID	76. INJURY CLASS	77. EJECT	78-1. RESTR. AINT	78-2. RESTR. PROPR	78-3. PASSIV RESTR.		
Schuyler Melanie A		F	22	1	4	6	67	72	77	79	85	2	6		
62. ADDRESS		2365 Seven Hickories Rd. Dover, DE 19901													
63. PHONE		(302) 698-1541													
64. INJURIES		Multiple Trauma													
65. EXAMINED BY DOCTOR:		66. REMOVED		7		67. REMOVED TO Nanticoke Memorial Hosp. by ME Investigator Brian McCarthy								68. HOSPITAL DISPOSITION DOPA	
61. NAME: LAST FIRST ML		69. SEX	70. AGE	71. VEH#	72. NO. IN VEH	73. SEAT#	74. STATU S	75. FIRST AID	76. INJURY CLASS	77. EJECT	78-1. RESTR. AINT	78-2. RESTR. PROPR	78-3. PASSIV RESTR.		
Nagyiski Andrea C		F	21	1	4	3	67	72	77	79	85	2	6		
62. ADDRESS		485 Judith Rd. Hartly, DE 19953													
63. PHONE		(302) 492-3023													
64. INJURIES		Multiple Trauma													
65. EXAMINED BY DOCTOR:		66. REMOVED		7		67. REMOVED TO Nanticoke Memorial Hosp. by ME Investigator Brian McCarthy								68. HOSPITAL DISPOSITION DOPA	
61. NAME: LAST FIRST ML		69. SEX	70. AGE	71. VEH#	72. NO. IN VEH	73. SEAT#	74. STATU S	75. FIRST AID	76. INJURY CLASS	77. EJECT	78-1. RESTR. AINT	78-2. RESTR. PROPR	78-3. PASSIV RESTR.		
Nagyiski Andrea C		F	21	1	4	3	67	72	77	79	85	2	6		
62. ADDRESS															
63. PHONE															
64. INJURIES															
65. EXAMINED BY DOCTOR:		66. REMOVED				67. REMOVED TO								68. HOSPITAL DISPOSITION	

FATAL

73. SEAT NUMBER		GENERAL		75. INJURY CLASS		78. RESTRAINT (CONT.)		81. IF PEDESTRIAN INVOLVED PLACE CODE IN BLOCK	
<div style="display: flex; align-items: center;"> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">2</div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">4</div> <div style="border: 1px solid black; padding: 2px;">5</div> <div style="border: 1px solid black; padding: 2px;">6</div> <div style="border: 1px solid black; padding: 2px;">7</div> <div style="border: 1px solid black; padding: 2px;">8</div> <div style="border: 1px solid black; padding: 2px;">9</div> </div> <div style="margin-left: 10px;"> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">2</div> </div> </div> <div style="margin-top: 5px;"> CAR SW 10=exterior of veh. </div>		1. YES 2. NO 3. UNKNOWN 4. N/A 5. PENDING 6. NONE 7. OTHER		74. POSSIBLE INJURY 75. NON-INCAPACITATING 76. INCAPACITATING 77. FATAL INJURY 77. EJECTION 78. PARTIALLY EJECTED 79. TOTAL EJECTION 80. NO EJECTION		CHILD RESTRAINTS 88. CHILD RESTR. USED 89. OTHER RESTR. USED 90. NONE USED MOTORCYCLE HELMET 91. NONE USED 92. USED PASSIVE RESTRAINTS 93. AIR BAG DEPLOYED 94. AIR BAG INOPERABLE 95. AUTO RESTR. USED 96. AUTO RESTR. INOPER.		PED#1 <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">04</div> PED#2 <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">04</div>	
79. POSTED SPEED LIMIT		74. STATUS		78. RESTRAINT		85. REMOVED		101. CROSSING AT INTERS.	
VEHICLE #1 <u>50</u> VEHICLE #2 <u>N/A</u> VEHICLE #3 <u>N/A</u> VEHICLE #4 <u>N/A</u>		66. DRIVER 67. PASSENGER 68. PEDESTRIAN 69. PEDALCYCLIST 70. POLICE 71. FIREMAN 72. AMBULANCE 73. REFUSED		82. FASTENED 83. NOT FASTENED LAP & SHOULDER 84. LAP ONLY USED 85. NEITHER USED 86. SHOULDER ONLY 87. BOTH USED		97. AMBULANCE 98. PARAMEDIC 99. HELICOPTER 100. PRIV. OWNED VEH.		102. CROSSING NOT AT INTERS. 103. WALKING WITH TRAFFIC 104. WALKING AGAINST TRAFFIC 105. STANDING 106. PUSH OR WORK ON VEH. 107. OTHER WORKING 108. N/A 109.	
INVESTIGATING OFFICER: Brian C. Talley		RANK: CPL		IDEM NUMBER: 70397		57. SUPERVISOR'S APPROVAL DATE		58. REVIEWER	
								59. PAGE 2 OF 3	





FAT AL

<input type="checkbox"/> 60. CONTINUATION	STATE OF DELAWARE UNIFORM TRAFFIC COLLISION REPORT CONTINUATION / SUPPLEMENT	DSP3	COMPLAINT NO. 03-04-45154	DSP HQ NO. (LEAVE BLANK) 0610
<input checked="" type="checkbox"/> 80. SUPPLEMENT		TROOP/DEPARTMENT		
INITIAL REPORT DATE 12 18 04				
OPERATOR #1 Thomas R. Mehrtens				
OPERATOR #2				

CODE 55.

On 12-18-04 I was dispatched to an unknown accident located on Halltown Rd near Pearson Corner Rd; Hartly. I arrived on the scene along with Tfc. Garnsy and emergency medical personnel. I first proceeded to locate subjects involved in the accident. I then observed a white male located in the ditch breathing and moving. A few feet from the male was a white female unresponsive with no movement. I then located a white female unresponsive with no movement lying near a utility pole. Paramedics on the scene began treatment on the victims.

I immediately began searching the area for any additional victims. I then responded to TFC. Garnsy's patrol vehicle and made contact with a white male who was placed inside the back seat. I asked the subject how many individuals were in the vehicle he stated, "Three others were in the car with me." I asked the subject if he was hurt, he stated, "Yes, I hit my head." I asked the subject again was there any other people in the car and he stated, "It was only the four of us." I then asked subject if he was the driver and he stated, "yes." I asked the subject his name and he stated, "Thomas Mehrtens." I asked him what happened and he stated, "Someone tried to run me off the road." During the interview I did observe a strong smell of an alcohol beverage coming from subject (Mehrtens). Medical team then began to treat subject as well.

Note: The above interview is not verbatim; please refer to videotape #10 (counter start time 08170 to 08281 with a start time of 02:49:37 am) for further details. Tape was logged into the temp evidence locker at Troop 3 at 0613 hours on 12-18-04.

I then proceeded to secure the accident scene until the F.A.I.R. team arrived. Only vehicles that entered the scene were ambulances that were slowly removed from scene to maintain scene integrity. Cpl. Talley of the accident team arrived and I then informed him of the details of the accident. I forwarded all documentation (vehicle registration, insurance card, and personal effects) to Cpl. Talley. I then was instructed to transport fingerprints from the scene to S.B.I. for a positive identification of the victims. After receiving the results I then responded back to troop 3, forwarded the results to the accident team and then was released from duty.

FATAL

55. INVESTIGATING OFFICER Alphonso Jones III	RANK Tfc	IBM NUMBER 3334	57. SUPERVISOR'S APPROVAL DATE BA 542 12/22	58. REVIEWER <i>[Signature]</i>	59. PAGE 1 OF 1
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<input type="checkbox"/> 60. CONTINUATION		STATE OF DELAWARE UNIFORM TRAFFIC COLLISION REPORT CONTINUATION / SUPPLEMENT		DSP3 TROOP/DEPARTMENT		1.	2.	DSP HQ NO. (LEAVE BLANK)
<input checked="" type="checkbox"/> 80. SUPPLEMENT						COMPLAINT NO.		
INITIAL REPORT DATE 12 18 04						03-04-45154		0010
OPERATOR #1 Thomas R. Mehrrens								
OPERATOR #2								
CODE 55.								
<p>On 12-18-04 I was dispatched to an unknown accident located on Halltown Rd near Pearson Corner Rd, Hartly. I arrived on the scene along with Tfc. Garusy and emergency medical personnel. I first proceeded to locate subjects involved in the accident. I then observed a white male located in the ditch breathing and moving. A few feet from the male was a white female unresponsive with no movement. I then located a white female unresponsive with no movement lying near a utility pole. Paramedics on the scene began treatment on the victims.</p> <p>I immediately began searching the area for any additional victims. I then responded to TFC. Garusy's patrol vehicle and made contact with a white male who was placed inside the back seat. I asked the subject how many individuals were in the vehicle he stated, "Three others were in the car with me." I asked the subject if he was hurt, he stated, "Yes, I hit my head." I asked the subject again was there any other people in the car and he stated, "It was only the four of us." I then asked subject if he was the driver and he stated, "yes." I asked the subject his name and he stated, "Thomas Mehrrens." I asked him what happened and he stated, "Someone tried to run me off the road." During the interview I did observe a strong smell of an alcohol beverage coming from subject (Mehrrens). Medical team then began to treat subject as well.</p> <p>Note: The above interview is not verbatim; please refer to videotape #10 (counter start time 08170 to 08281 with a start time of 02:49:37 am) for further details. Tape was logged into the temp evidence locker at Troop 3 at 0613 hours on 12-18-04.</p> <p>I then proceeded to secure the accident scene until the F.A.I.R. team arrived. Only vehicles that entered the scene were ambulances that were slowly removed from scene to maintain scene integrity. Cpl. Talley of the accident team arrived and I then informed him of the details of the accident. I forwarded all documentation (vehicle registration, insurance card, and personal effects) to Cpl. Talley. I then was instructed to transport fingerprints from the scene to S.B.I. for a positive identification of the victims. After receiving the results I then responded back to troop 3, forwarded the results to the accident team and then was released from duty.</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">FATAL</p>								
INVESTIGATING OFFICER Alphonso Jones III		RANK TFC		ID# NUMBER 333473		57. SUPERVISOR'S APPROVAL DATE 12/22		58. REVIEWER 59.
FORM 439 A						PAGE 1 OF 1		

Page: 1	Report Date: 12/18/2004	Agency: Troop 3 State Police	Complaint: 03-04-045154	0010
Reported Date and Time SAT 12/18/2004 0237		Initial Crime Report		Occurred: SAT 12/18/2004 0235
Location: SR 8 W/O SR 44 5 MILES E/O HARTLY				
M.O. and Incident Overview: The defendant, in the course of operating a motor vehicle under the influence of alcohol, killed victim Melanie Schuyler, victim Andrea Nagyiski, and injured John Keiser due to a motor vehicle collision.				
Grid 082-214	Sector 31	County Kent	Domestic Related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4-F-14 Sent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Gen Broadcast Sent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Victim Information

Victim Number 001	Name NAGYISKI, ANDREA C				
Type Individual	Sex Female	Race White	Ethnic Origin Non-Hispanic	Age 21	D.O.B. [REDACTED]/1983
Address 485 Judith Road Hartly, DE 19953		Resident Status Full Time	Home Telephone (302) 492-3023	Employer/School	Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Officer Comments		
Injuries		Description of Injuries			

Victim Number 002	Name SCHUYLER, MELANIE				
Type Individual	Sex Female	Race White	Ethnic Origin Non-Hispanic	Age 22	D.O.B. [REDACTED]/1982
Address 107 Sparkey Lane Dover, DE 19904		Resident Status Full Time	Home Telephone (302) 698-1541	Employer/School	Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Officer Comments		
Injuries		Description of Injuries			

Victim Number 003	Name KEISER, JOHN W				
Type Individual	Sex Male	Race White	Ethnic Origin Non-Hispanic	Age 21	D.O.B. [REDACTED]/1983
Address 83 Brittney Lane Dover, DE 19901		Resident Status Full Time	Home Telephone (302) 492-1857	Employer/School	Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments		
Injuries		Description of Injuries MAJOR HEAD AND BODY TRAUMA			

Victim Number 004	Name				
Type Society/Public	Sex	Race	Ethnic Origin	Age	D.O.B.
Address		Resident Status	Home Telephone	Employer/School	Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments		
Injuries		Description of Injuries			

Suspect/Defendant Information

Sequence 001	Type Defendant	SBT Number 00353328	Name MEHRTENS, THOMAS R J		Nick Name
Sex Male	Race White	Ethnic Origin Non-Hispanic	Age 22	D.O.B. [REDACTED]/1982	Height 5' 08"
Hair Color Brown	Hair Length	Hair Style	Facial Hair	Voice Speech	Teeth
Build	Glasses	Disguise	Disguise Color(s)	Resident Status Full Time	Unusual Characteristics
Armed With Unarmed		Address 3034 S STATE ST CAMDEN, DE 19934			
Home Telephone (302) 363-3946		Employer/School A & R SERVICES DOVER, DE 19901		Work Telephone (302) 697-1475	
Arrest Number 187583	Arrest Type Warrant	Suspect's Clothing Description			
Suspect Vehicle Passenger Car	Year 2002	Make and Model or Brand Pontiac Firebird			

Reporting Officer
CPL/TALLEY - 7937Supervisor Approval
JAHN HITCHENS PSPT542 Date 12/29/2004 1212

Page: 2	Report Date: 12/18/2004	Agency: Troop 3 State Police	Complaint: 03-04-045154
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0010

Sequence 001 Continued	Suspect/Defendant Information			
State DE	License 105329	Exp. Year 2002	Body Style 2 DR	Color(s) Black

Crimes and Associated Information

Victim Number 001	Crime Seq 001	Statute DE:11:0632:0001:F:B	Crime Description Manslaughter Recklessly Caused Death Of Another Person
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 0909 - Homicide/Negligent Manslaughter/Vehicle	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Other	Assault Factor Other Felony Involved	Homicide Circumstance Other Felony Involved Homicide Situation Multiple Victim

Victim Number 002	Crime Seq 002	Statute DE:11:0632:0001:F:B	Crime Description Manslaughter Recklessly Caused Death Of Another Person
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 0909 - Homicide/Negligent Manslaughter/Vehicle	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Other	Assault Factor Other Felony Involved	Homicide Circumstance Other Felony Involved Homicide Situation Multiple Victim

Victim Number 003	Crime Seq 003	Statute DE:11:0613:0003:F:B	Crime Description Assault First Degree Conduct Created Risk of Death Caused Serious Injury
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 13234C - Aggravated Assault/Non-Family Other Dangerous Weapon	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Motor Vehicle/Used as Weapon	Assault Factor Other Felony Involved	

Victim Number 004	Crime Seq 004	Statute DE:21:4177:0001:M:	Crime Description Driving a Vehicle Under the Influence of Alcohol
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5404 - Driving Under the Influence/Liquor	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	FATAL		

Victim Number 004	Crime Seq 005	Statute DE:21:4175:000A:M:	Crime Description Reckless Driving
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5405 - Moving Violation/Traffic	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No			

Victim Number 004	Crime Seq 006	Statute DE:21:4169:0A1D:M:	Crime Description Speeding in Excess of 50 MPH on a 2-Lane Roadway
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer General Offense
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5405 - Moving Violation/Traffic	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No			

Victim - Suspect/Defendant Relationships

Victim - 001 NAGYISKI, ANDREA C	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 002 SCHUYLER, MELANIE	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 003 KEISER, JOHN W	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 004 Society/Public	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Victimless Crime

Investigative Narrative

See report for narrative.

Reporting Officer CPL/I TALLEY - 7937	Supervisor Approval JAHN HITCHENS PSPT542 Date 12/29/2004 1212
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Page: 1	Report Date: 12/18/2004	Agency: Troop 3 State Police	Complaint: 03-04-045154	0010
Reported Date and Time SAT 12/18/2004 0237		Initial Crime Report		Occurred: SAT 12/18/2004 0235
Location: SR 8 W/O SR 44 5 MILES E/O HARTLY				
M.O. and Incident Overview: The defendant, in the course of operating a motor vehicle under the influence of alcohol, killed victim Melanie Schuyler, victim Andrea Nagyiski, and injured John Keiser due to a motor vehicle collision.				
Grid 082-214	Sector 31	County Kent	Domestic Related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4-F-14 Sent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Gen Broadcast Sent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Victim Information

Victim Number 001	Name NAGYISKI, ANDREA C			
Type Individual	Sex Female	Race White	Ethnic Origin Non-Hispanic	Age 21
Address 485 Judith Road Hartly, DE 19953		Resident Status Full Time	Home Telephone (302) 492-3023	Employer/School Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments	
Injuries		Description of Injuries		

Victim Number 002	Name SCHUYLER, MELANIE			
Type Individual	Sex Female	Race White	Ethnic Origin Non-Hispanic	Age 22
Address 107 Sparkey Lane Dover, DE 19904		Resident Status Full Time	Home Telephone (302) 698-1541	Employer/School Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments	
Injuries		Description of Injuries		

Victim Number 003	Name KEISER, JOHN W			
Type Individual	Sex Male	Race White	Ethnic Origin Non-Hispanic	Age 21
Address 83 Brittney Lane Dover, DE 19901		Resident Status Full Time	Home Telephone (302) 492-1857	Employer/School Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments	
Injuries		Description of Injuries MAJOR HEAD AND BODY TRAUMA		

Victim Number 004	Name			
Type Society/Public	Sex	Race	Ethnic Origin	Age
Address		Resident Status	Home Telephone	Employer/School Work Telephone
Reporting Person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Deceased? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Officer Comments	
Injuries		Description of Injuries		

Suspect/Defendant Information

Sequence 001	Type Defendant	SBI Number 00353328	Name MEHRTENS, THOMAS R J		Nick Name
Sex Male	Race White	Ethnic Origin Non-Hispanic	Age 22	D.O.B. 1982	Height 5' 08"
Hair Color Brown	Hair Length	Hair Style	Facial Hair	Voice Speech	Teeth
Disguise	Disguise Color(s)	Resident Status Full Time	Unusual Characteristics	Armed With Unarmed	
Address 3034 S STATE ST CAMDEN, DE 19934		Home Telephone (302) 363-3946	Employer/School A & R SERVICES DOVER, DE 19901	Work Telephone (302) 697-1475	
Arrest Number 187583	Arrest Type Warrant	Suspect's Clothing Description			
Suspect Vehicle Passenger Car	Year 2002	Make and Model or Brand Pontiac Firebird			

Reporting Officer CPL/1 TALLEY - 7937	Supervisor Approval JAHN HITCHENS PSPT542 Date 12/29/2004 1212
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Page: 2	Report Date: 12/18/2004	Agency: Troop 3 State Police	Complaint: 03-04-045154
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0010

Sequence 001 Continued	Suspect/Defendant Information
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State DE	License 105329	Exp. Year 2002	Body Style 2 DR	Color(s) Black
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Crimes and Associated Information

Victim Number 001	Crime Seq 001	Statute DE:11:0632:0001:F:B	Crime Description Manslaughter Recklessly Caused Death Of Another Person
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 0909 - Homicide/Negligent Manslaughter/Vehicle	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Other	Assault Factor Other Felony Involved	Homicide Circumstance Other Felony Involved
			Homicide Situation Multiple Victim

Victim Number 002	Crime Seq 002	Statute DE:11:0632:0001:F:B	Crime Description Manslaughter Recklessly Caused Death Of Another Person
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 0909 - Homicide/Negligent Manslaughter/Vehicle	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Other	Assault Factor Other Felony Involved	Homicide Circumstance Other Felony Involved
			Homicide Situation Multiple Victim

Victim Number 003	Crime Seq 003	Statute DE:11:0613:00a3:F:B	Crime Description Assault First Degree Conduct Created Risk of Death Caused Serious Injury
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 13234C - Aggravated Assault/Non-Family Other Dangerous Weapon	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon/Force Used Motor Vehicle/Used as Weapon	Assault Factor Other Felony Involved	

Victim Number 004	Crime Seq 004	Statute DE:21:4177:00A1:M:	Crime Description Driving a Vehicle Under the Influence of Alcohol
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5404 - Driving Under the Influence/Liquor	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No			

Victim Number 004	Crime Seq 005	Statute DE:21:4175:000A:M:	Crime Description Reckless Driving
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5405 - Moving Violation/Traffic	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No			

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Victim Number 004	Crime Seq 006	Statute DE:21:4169:0A1D:M:	Crime Description Speeding in Excess of 50 MPH on a 2-Lane Roadway
Location Type Highway/Roadway/Alley		Status Adult Arrest 12/18/2004	Involvement <input checked="" type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer
Suspected Hate/Bias <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - N/A		Crime Code 5405 - Moving Violation/Traffic	
Burglary Force Involved <input type="checkbox"/> Yes <input type="checkbox"/> No			

Victim - Suspect/Defendant Relationships

Victim - 001 NAGYISKI, ANDREA C	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 002 SCHUYLER, MELANIE	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 003 KEISER, JOHN W	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Acquaintance
Victim - 004 Society/Public	Suspect/Defendant - 001 MEHRTENS, THOMAS R J	Victim Offender Relationship Victimless Crime

Investigative Narrative

See report for narrative.

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SUMMARY REPORT		
INITIAL REPORT DATE: 121804	I. UNIFORM TRAFFIC COLLISION REPORT	COMPLAINT NUMBER: 03-04-45154
OPERATOR #1 Mehrtens, Thomas	FATAL MOTOR VEHICLE COLLISION	DSP TROOP 3
OPERATOR #2 N/A		DSP HQ NO.

I. UNIFORM TRAFFIC COLLISION REPORT

The Uniform Traffic Collision Report is attached separately.

II. DESCRIPTION OF COLLISION**A. SYNOPSIS****1. VICTIM AND INJURED:****FATAL**

Victim #1 (Passenger #1, R/R seat), Melanie A. Schuyler, WF 22, DOB [REDACTED]/1982 of 2365 Seven Hickories Road, Dover, Delaware 19901. The victim sustained multiple traumatic injuries including cerebral contusions and hemorrhage with a fracture to the skull due to blunt force trauma from the motor vehicle collision.

Victim #2 (Passenger #2, R/F seat), Andrea C. Nagyiski, WF 21, DOB [REDACTED]/1983 of 485 Judith Road, Hartly, Delaware 19953. The victim sustained multiple traumatic injuries due to blunt force trauma from the motor vehicle collision.

Injured #1 (Operator #1), Thomas R. Mehrstens, WM 22, DOB [REDACTED]/1982 of 3034 South State Street, Camden, Delaware 19934. The operator sustained an abrasion to the forehead.

Injured #2 (Passenger #3, L/R seat), John W. Keiser, WM 21, DOB [REDACTED]/1983 of 83 Brittney Lane, Hartly, Delaware 19953. Injured #2 sustained massive head and body trauma due to blunt force trauma.

There were no fires or explosions involved in this collision.

2. VEHICLE(S) / OPERATOR(S) INVOLVED, INSURANCE INFORMATION:**VEHICLE#1:**

2002 Pontiac Firebird, Black in Color, Vin #2G2FV22G322160509, bearing DE registration 105329. Vehicle #1 was registered to Thomas R. Mehrstens of 3034 South State Street, Camden, Delaware 19934. Hartford Underwriters Insurance Company insured V1. The policy was valid at the time of the collision, policy #44 UEC GF0579.

56. INVESTIGATING OFFICER Brian C. Talley	RANK Cpl./1	ID NUMBER 937	57. SUPERVISOR'S APPROVAL DATE 12/25	58. REVIEWER	59. PAGE# 3 of 9
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COMPLAINT NUMBER: 03-04-45154

SUMMARY REPORT (Continued)

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Thomas Mehrstens was the operator of Vehicle #1; he carried a valid Delaware Class D driver's license, number 1259378.

3. DESCRIPTION OF SCENE:

The collision occurred on SR 8, Halltown Road just west of Hartly Road, SR 44. SR 8 is a two-lane roadway that runs east and west. There was no street lighting in the area of the collision. The roadway is constructed of asphalt. The roadway, which has a width of 22'9", is marked with a broken yellow line, at the location of the first POI. The curve prior to the collision is marked with a solid double yellow, which prohibits passing in either direction. There is a 9'3" asphalt shoulder on the south edge of the roadway and an 8' shoulder on the N/EOR in the area of the collision. Prior to the collision, the roadway curves to the left. After exiting the curve, the roadway becomes straight and is marked with a broken yellow line, which allows passing for vehicles traveling eastbound. The geographical description of the area would be considered rural. A tree line borders the north edge of the road prior to the curve, which lead to the front lawn of individual residences. On the south side of the road there is a grass ditch, which also leads to the front lawn of individual residences. Investigation revealed that V1 had turned off of Brittney Lane prior to the collision. Brittney Lane is a north/south roadway that intersects with SR 8 approximately a half mile west of the collision scene. SR 44 is approximately .2 miles east of the collision scene.

The sky was clear and the roadway was dry when the collision occurred. The weather was cold, approximately 20 degrees.

I approached the scene from the east. The fire police blocked the roadway at the intersection E/O the collision. All traffic was being re-routed to preserve the crime scene. The speed in the area of the collision is posted at 50 mph. I noticed what appeared to have been critical speed scuff marks in the eastbound lane of travel which left the S/EOR in the grass ditch. There were also scuff marks on the south edge of the shoulder as you exit the curve. There was vehicle debris and damaged tree limbs leading up to the FRP of the vehicle.

The vehicle was located approximately 19' S/O the S/EOR. The vehicle had severe front end and right side damage. Victim #1, Melanie Schuyler, was lying in the ditch on the S/EOR just prior to the FRP of the vehicle. Victim #2, Andrea Nagyiski, was lying next to the telephone pole on the S/EOR approximately 80' W/O FRP of V1. The victim's were left on scene until the arrival of the Medical Examiner, Brian McCarthy.

Hartly volunteer fire and rescue crews/vehicles were on scene upon my arrival. A fire truck light tower illuminated the vehicle. The medics had departed the scene. The operator was transported to Kent General Hospital. The other passenger, John Keiser, was flown to Christiana Hospital prior to my arrival.

4. HOW AND WHY COLLISION OCCURRED:

V1 was E/B on SR 8 exiting a curve at a high rate of speed. After V1 exited the curve, V1 left the S/EOR and traveled onto the shoulder. Operator #1 attempted to hold the vehicle on the roadway by steering left. This causes V1 to travel from the shoulder across the E/B lane and into the W/B lane. As V1 enters the westbound lane operator

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SUMMARY REPORT (Continued)

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realizes that he has overcorrected and steers the vehicle back to the right. Due to the vehicle penetrating the westbound lane and operator steering back to the right, the vehicle began to yaw clockwise. V1 then travels across the E/B lane and onto the shoulder. V1 continued off the shoulder and into a ditch striking a wooden construction sign and a mailbox for POI #1, 12' S/O S/EOR. V1 continued E/B striking the driveway culvert with the front end for POI #2, 12' S/O S/EOR, 53' E/O POI #1. V1 began to rotate and turn on its right side. The vehicle then dug into the ground for POI #3, 18' S/O S/EOR, causing the vehicle to flip over ejecting the passengers. V1 slid across the grass until it came to rest facing south for FRP, 19' S/O S/EOR. The total distance from POI #1 to FRP is approximately 340'.

5. EMERGENCY RESPONSE:

Medic Unit #66, consisting of David Abramson and Douglas Haddad was dispatched to the scene at 0241 hrs. They arrived at the scene at 0258 hrs. Medic Unit #67 was dispatched at 0241 and arrived at the scene at 0254. Hartly Fire and Rescue, Station 51, was dispatched to the scene at 0241 hrs. Ambulance Unit C51 was also dispatched at that time. Their Ambulances, A51 and B51 were dispatched at 0245. The Fire and Rescue arrived at 0253 hrs. Ambulance C51 arrived at 0250, Ambulance A51 arrived at 0301 and Ambulance B51 arrived at 0249 hrs. Ambulance B51 departed the scene at 0308 hrs with the Operator #1 and arrived at Kent General Hospital at 0316 hrs. Ambulance's A51 and C51 did not transport anyone from the scene. They cleared the scene at 0308 hrs after the paramedics pronounced the operator dead. The two passengers were left at the scene until the arrival of the State Police Accident Investigation Team. The Delaware State Police Helicopter, Trooper 4 was dispatched at 0241 and arrived on scene at 0302. Trooper 4 departed the scene at 0335 hrs and transported the passenger, John Keiser, to Christiana Hospital. Trooper 4 arrived at Christiana Hospital at 0352. For further information, see computer printouts from Kent County Dispatch Center.

B. INVESTIGATIVE ACTION**FATAL****1. CAUSE OF DEATH****A. PRONOUNCED BY, DATE & TIME:**

Melanie A. Schuyler and Andrea C. Nagyiski were pronounced dead at the scene by Dr. Johnson of the Kent General Hospital Staff. He used information relayed from the paramedic to pronounce the victims dead at 0318 hrs.

B. MEDICAL EXAMINER INVESTIGATOR:

Mr. Brian McCarthy, Forensic Investigator, with the Medical Examiner's Office in Seaford arrived at the scene on Saturday, December 18, 2004 at 0530 hrs. He transported the victims from the scene to the Medical Examiners Office at Nanticoke Memorial Hospital.

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SUMMARY REPORT (Continued)

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5. PHOTOGRAPHS:

Sixty photographs were taken of the scene during the initial investigation. They were taken under nighttime and daytime conditions. Twelve photographs were taken of the vehicle the day of the vehicle inspection. A video was taken of the scene during the initial investigation.

Photographs are on file at the Troop #3 F.A.I.R. Office. Copies may be obtained by obtaining a subpoena.

6. ASSISTING POLICE OFFICERS:

Tfc. Alphonso Jones #334, DSP Troop 3 Traffic, was the first Trooper at the scene. He arrived at the scene at 0249 hrs. Tfc. Jones made contact with Thomas Mehrstens at which time Mehrstens stated that he was the driver of the vehicle. He secured the scene until arrival of the F.A.I.R. Team. (See traffic Supplement for further details).

Tfc. Angela Garnsey #377, DSP Troop 3 Traffic, was the second Trooper on scene. She arrived on scene at 0249 hrs and contacted Def. Thomas Mehrstens who was the operator of the vehicle. Tfc. Garnsey transported Operator #1 to Kent General Hospital and was present at the time blood was drawn from Operator #1. (See AIR report and supplement prepared by Tfc. Garnsey).

Sgt. Jahn Hitchens #542, DSP Troop 3 F.A.I.R., responded to the scene. He began assisting with processing the scene and taking a video of the scene. Sgt. Hitchens assisted with the reconstruction measurements and was the operator of the total station used to shoot the scene. He also interviewed the defendant at the troop. (See taped statement and AIR report prepared by Sgt. Hitchens).

7. EVIDENCE / PROPERTY RECEIPTS:

Tfc. Garnsey responded to Kent General Hospital and had blood obtained from Operator #1. The two blood kit numbers were S-0433 and S-0434. The blood kits were transported back to Troop 3 and stored in the temporary evidence refrigerator.

Tfc. Jones removed the videotape from his patrol vehicle and stored it in the Troop 3 temporary evidence locker on 12-18-04 at 0613 hours.

C. INTERVIEWS**1. PRINCIPLES:**

Interview Operator #1:

FATAL

Operator #1 was interviewed at Troop 3 by Sgt. Jahn Hitchens. Operator #1 was read his Miranda Rights at which time he advised he understood and would answer questions. Operator #1 stated that he was the operator of the vehicle at the time of the collision. He stated that all the passengers, Melanie Schuyler, Andrea Nagyiski, and John Keiser were all in the vehicle during the collision. Operator #1 admitted to drinking

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SUMMARY REPORT (Continued)

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alcoholic beverages prior to driving. Operator #1 advised that he was traveling approximately 60 mph. Operator #1 also stated that an unknown vehicle ran him off the road. (See taped interview for further details).

2. WITNESSES AND OTHER PC'S:

PC-1 Orville Mosley Jr. 3845 Seven Hickories Road, Dover, DE 19901 (H) 734-8391, (C) 399-8650. PC-1 stated that he and his girlfriend were traveling E/B on SR 8 and came upon clumps of mud in the roadway and then observed a male subject standing in the ditch. PC-1 turned around and saw the vehicle facing S/B in the wooded area. PC-1 advised that there was still steam and heat coming from the vehicle. PC-1 contacted the male subject that was standing in the ditch who advised that he was looking for the other occupants in the vehicle. PC-1 then observed a female subject that appeared dead lying in the ditch. He also observed a female subject wrapped around the telephone pole. PC-1 advised that the male subject moved the body away from the telephone pole prior to police arrival. PC-1 advised that the male subject advised him that a vehicle ran him off the road. PC-1 stated that he traveled E/B on SR 8 from Hourglass Road and did not pass any vehicles prior to arriving at the scene.

D. RECONSTRUCTION RESULTS:

This collision was reconstructed in an attempt to obtain a speed on Vehicle #1. After exiting the curve, V1 left critical speed scuff marks in the roadway while attempting to steer through the curve. I used the Critical Speed formula to obtain the speed of V1. I used the cord measurement of 70' and a middle ordinate measurement of 5 3/4" to calculate a speed of 115 mph in a posted 50 mph zone. I used the drag factor of .78, which was obtained by using the VC 2000.

E. PROSECUTIVE ACTION:

Operator #1 Thomas Mehrkens was arrested for two counts of Manslaughter, Assault 1st, Driving Under the Influence, Reckless Driving and Speeding. Operator #1 was arraigned at Court 7 before of Judge Darling. He posted a \$91,350 secured bond and was released.

FATAL

F. INVESTIGATOR'S OPINION AND COMMENTS:

After consideration of the facts of this collision, I believe that V1 was traveling E/B on SR 8 exiting a left curve in the roadway at a high rate of speed. Operator was unable to negotiate the left curve and began to leave the S/EOR. Operator corrected the vehicle to the left with the vehicle tires beginning to scuff. After returning to the E/B lane and started to enter the W/B lane, he steered back to the right in an attempt to remain in the E/B lane. Operator overcorrected to the right causing the vehicle to rotate clockwise. Operator again caused the vehicle tires to scuff as it rotated clockwise. At this point, the vehicle became uncontrollable and left the S/EOR across the shoulder striking a ditch/highway sign. The vehicle slid along the ditch approximately 53' before striking a

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culvert. The vehicle then continued sliding and overturning. The three passengers were ejected as the vehicle overturned. There was no evidence of braking on the road before leaving the edge of the roadway. The vehicle overturned and ejected the three passengers, killing two of them.

Alcohol was a major contributing factor. His preliminary blood alcohol reading was a .15%. The level of intoxication along with the high rate of speed was the cause of the collision. No one in the vehicle was wearing their seatbelt.

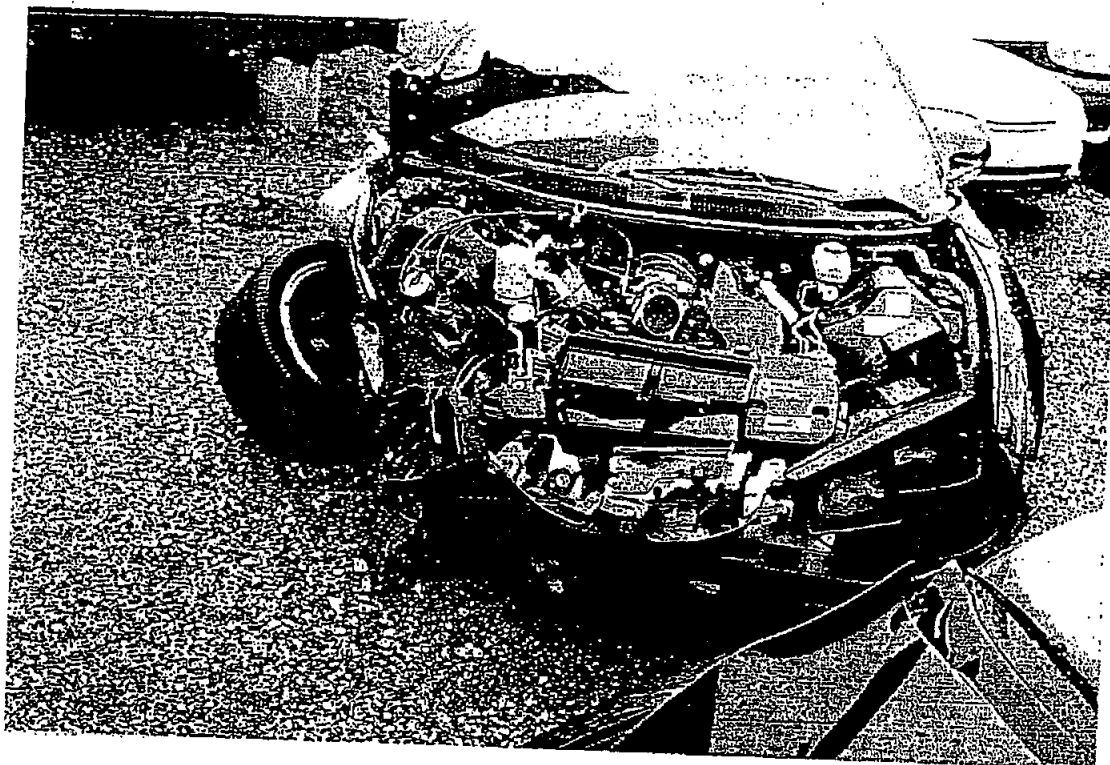
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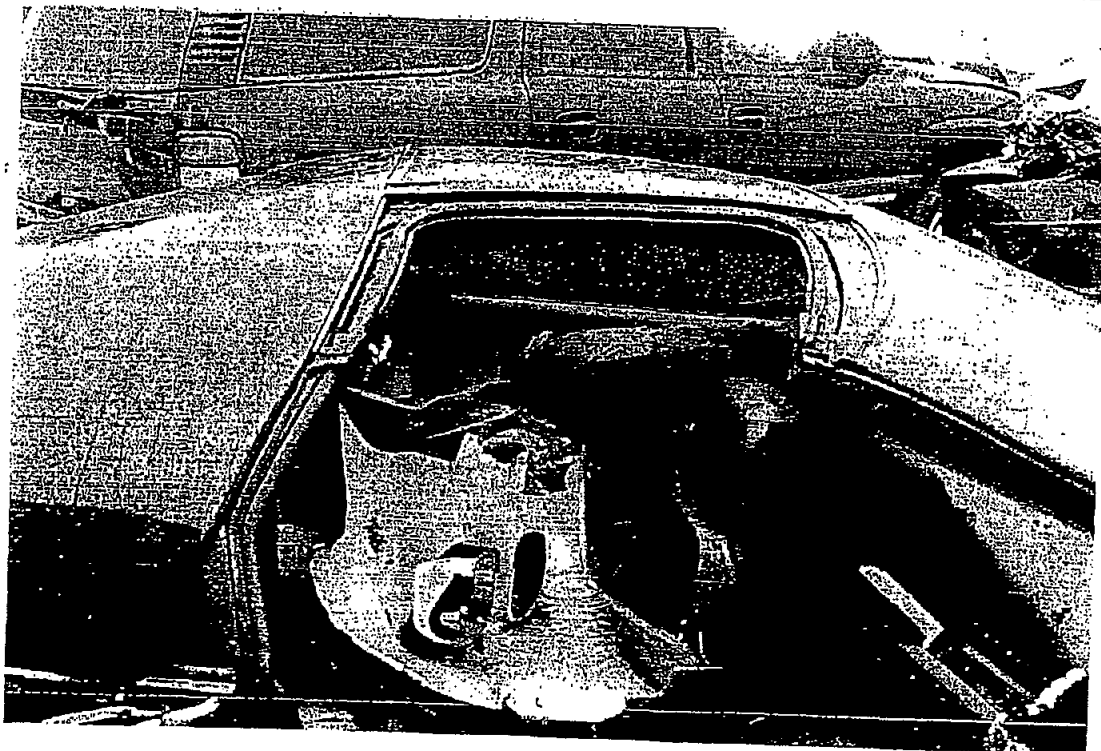












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C. AUTOPSY:

Dr Judith Tobin, Assistant Medical Examiner at Nanticoke Memorial Hospital performed an Autopsy on Saturday, December 18, 2004 at 1000 hrs on Victim Andrea Nagyiski. Dr. Tobin determined the cause of death to be multiple traumatic injuries due to blunt force trauma.

Dr. Tobin also performed an Autopsy on Saturday, December 18, 2004 at 1145 hrs on Victim Melanie Schuyler. Dr. Tobin determined the cause of death to be multiple traumatic injuries including cerebral contusions and hemorrhage and several fractures to the skull due to blunt force trauma.

Present at the autopsy were Dr. Tobin, Brian McCarthy, ME Investigator, and Cpl/1 Robert Daddio, DSP Troop 3 Evidence Detection Unit.

D. METHOD OF IDENTIFICATION:

The victim, Melanie Schuyler, was identified at the scene by a Delaware driver's license photograph, which was located on the DMV file. Victim #2 Andrea Nagyiski was identified by her fingerprints located on file at the State Bureau of Identification.

2. NEXT OF KIN NOTIFIED:

Cpl/3 Rebecca Gullledge, DSP Troop 3 Victim Services Officer, responded to the scene and obtained information about the investigation. She then traveled to 2365 Seven Hickories Road to notify and render services to the Schuyler family. She also responded to 485 Judith Road to notify the Nagyiski family.

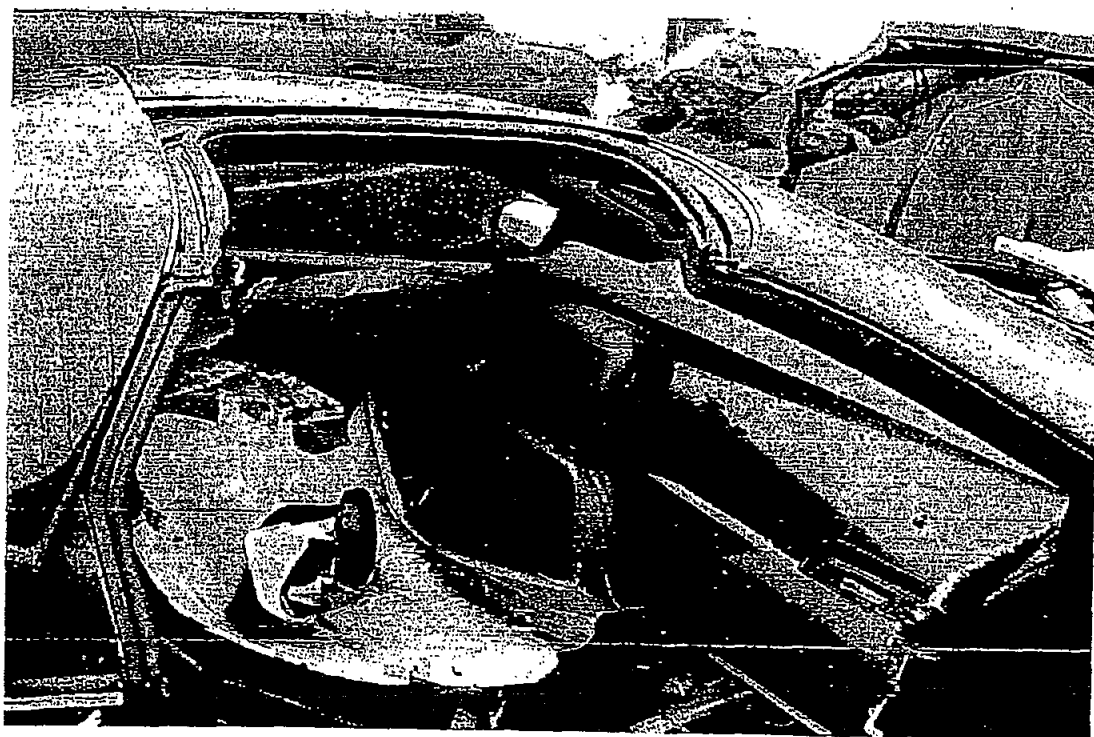
3. EXAMINATION OF VEHICLE:**FATAL**

Mr. Kevin Covey, DSP Troop 3 mechanic, conducted an examination/inspection of the vehicle at the Delaware State Police Headquarters on Monday, December 27, 2004 at 0900. I was present with Mr. Covey during the inspection. The vehicle was equipped with four BF Goodrich G-Force tires of uniform size. All of the tires had a 6/32nd tread depth. The R/front and R/rear tires were flat from the collision. The L/front had 26 lbs of air pressure and the L/rear had 22 lbs of pressure. Disc brakes were observed on the front and rear wheels. There was no leakage near the brakes. The engine area was completely damaged due to the impact. I located the reservoir levels for the power steering and power brakes. Both were full. There were no discrepancies noted that could have caused this collision.

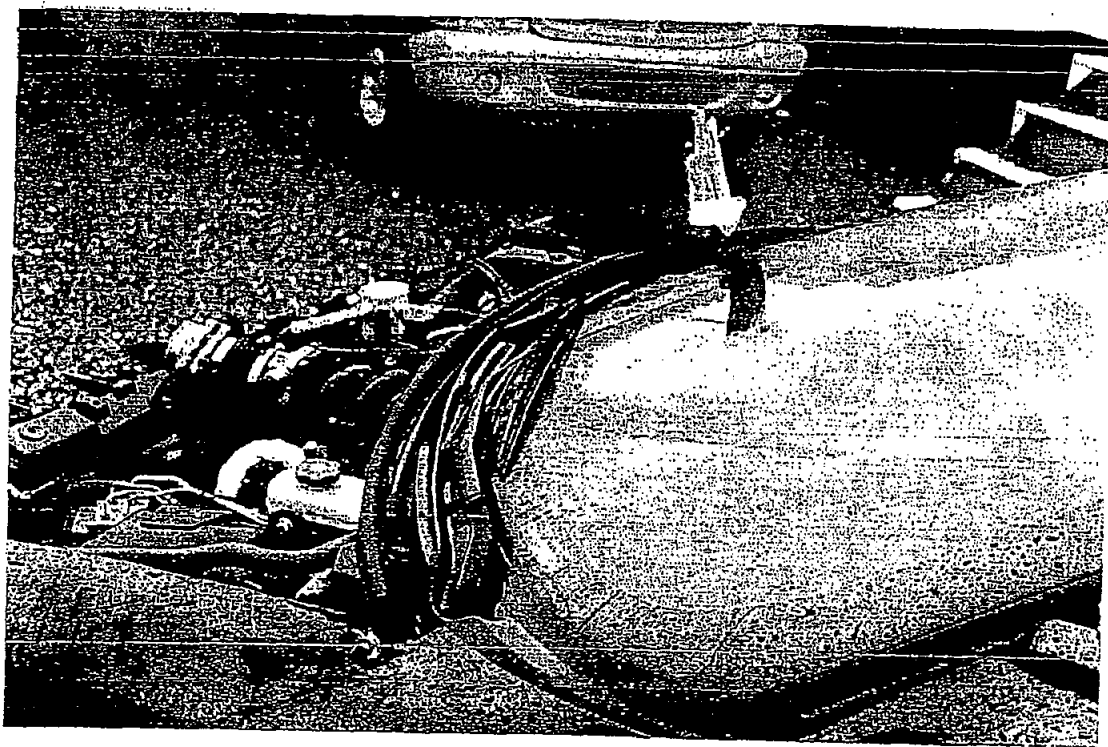
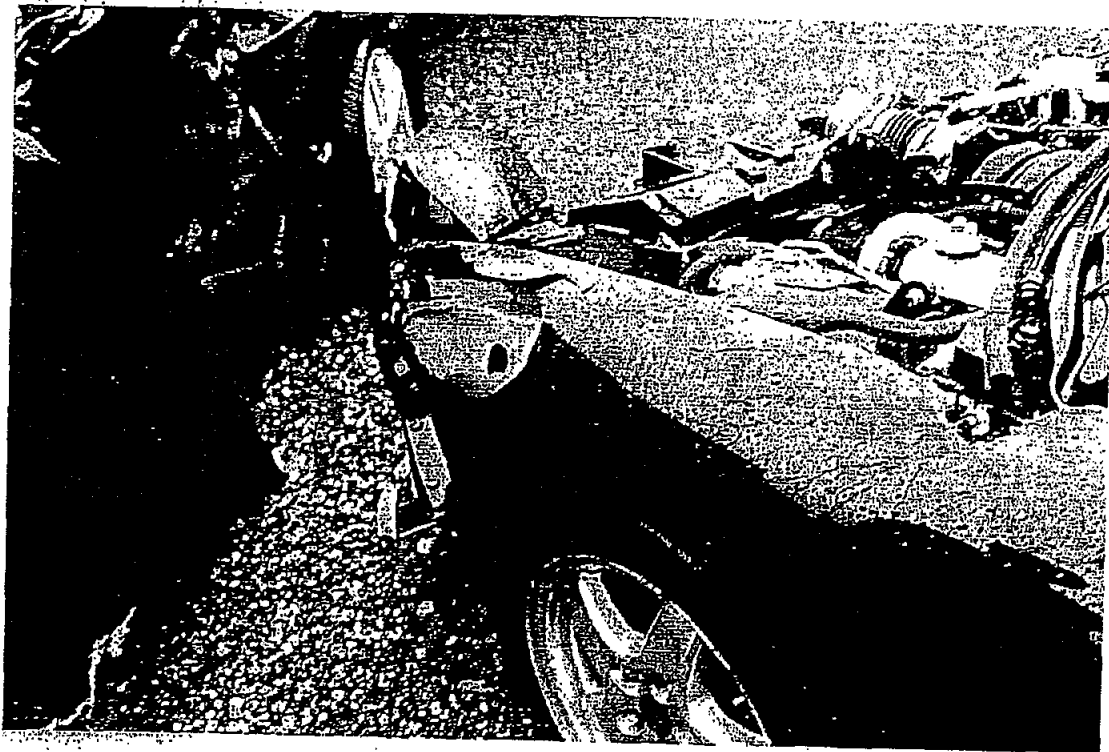
4. DRINK INVESTIGATION:

Alcohol does appear to have been a factor in this collision. A blood alcohol test was obtained at Kent General Hospital and has been sent to the DSP State Chemist Office to be analyzed. A preliminary result from Kent General Hospital indicated Operator #1's BAC was a .15%.

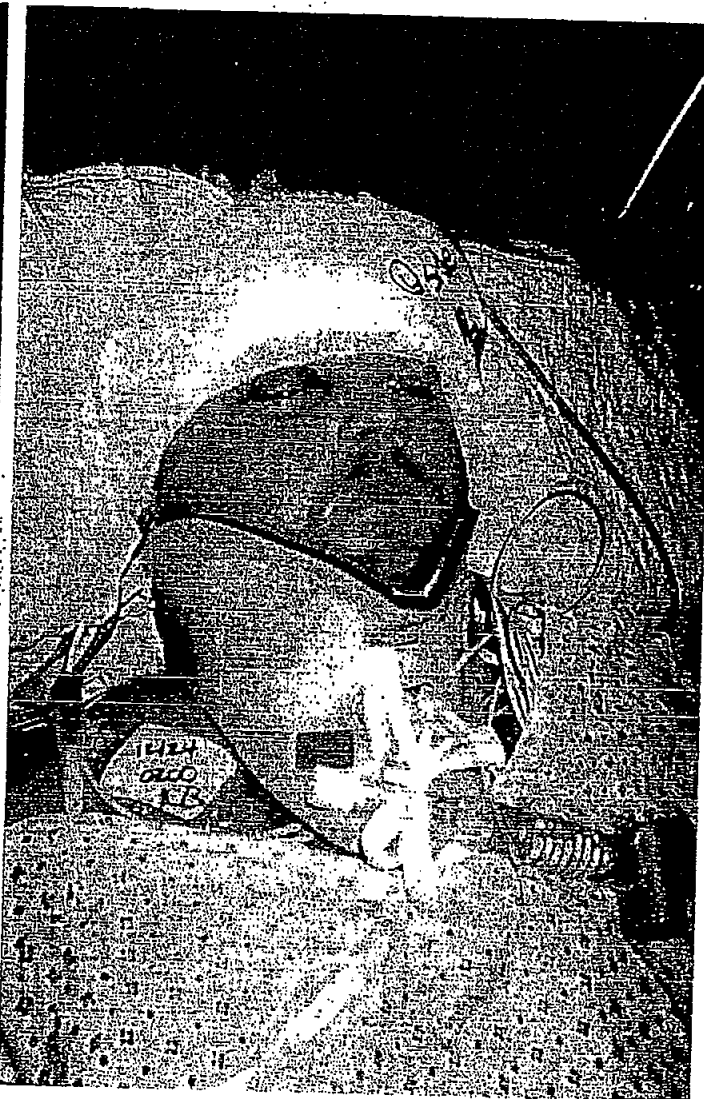






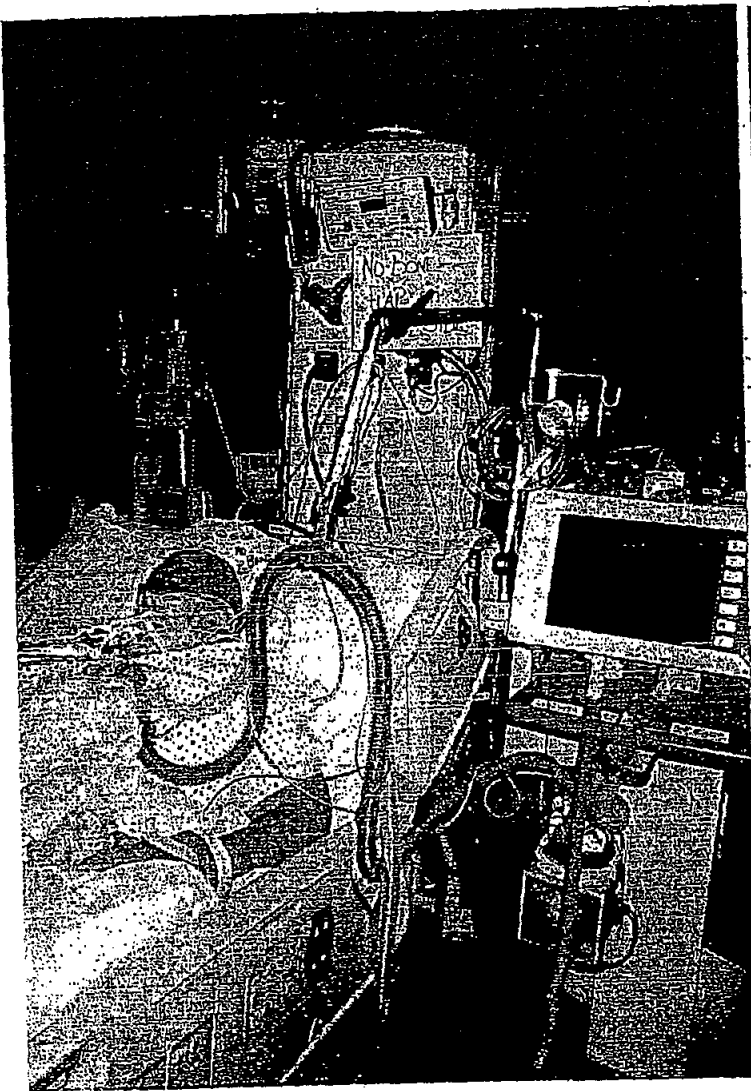


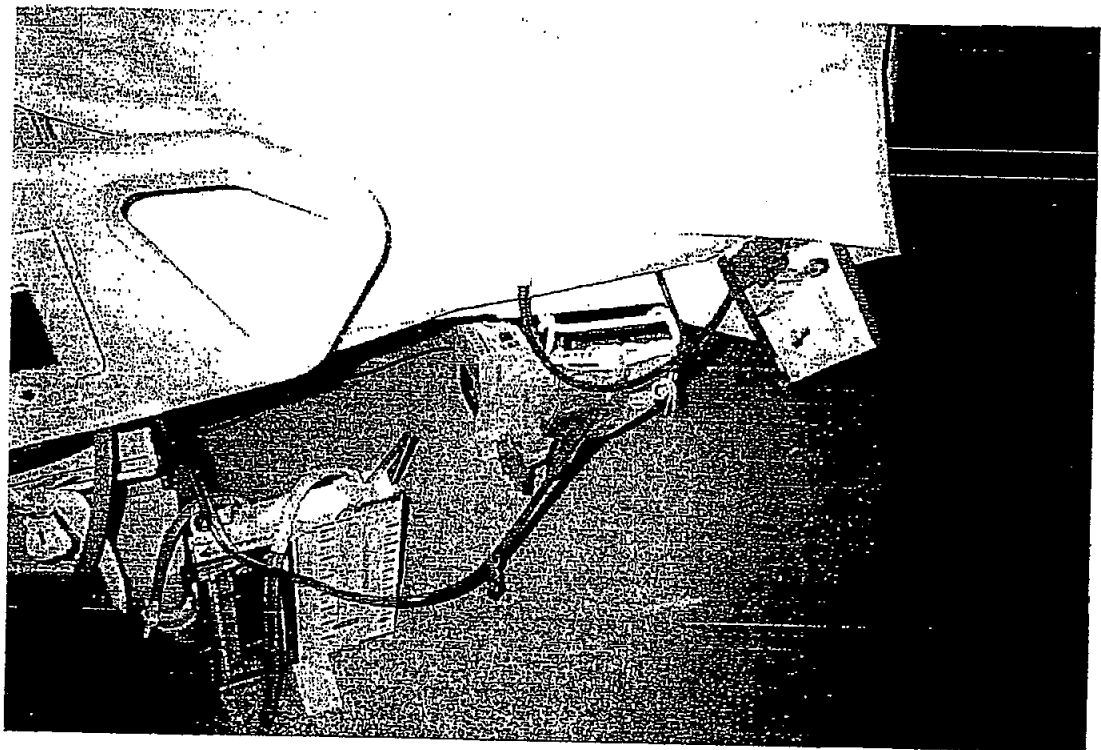
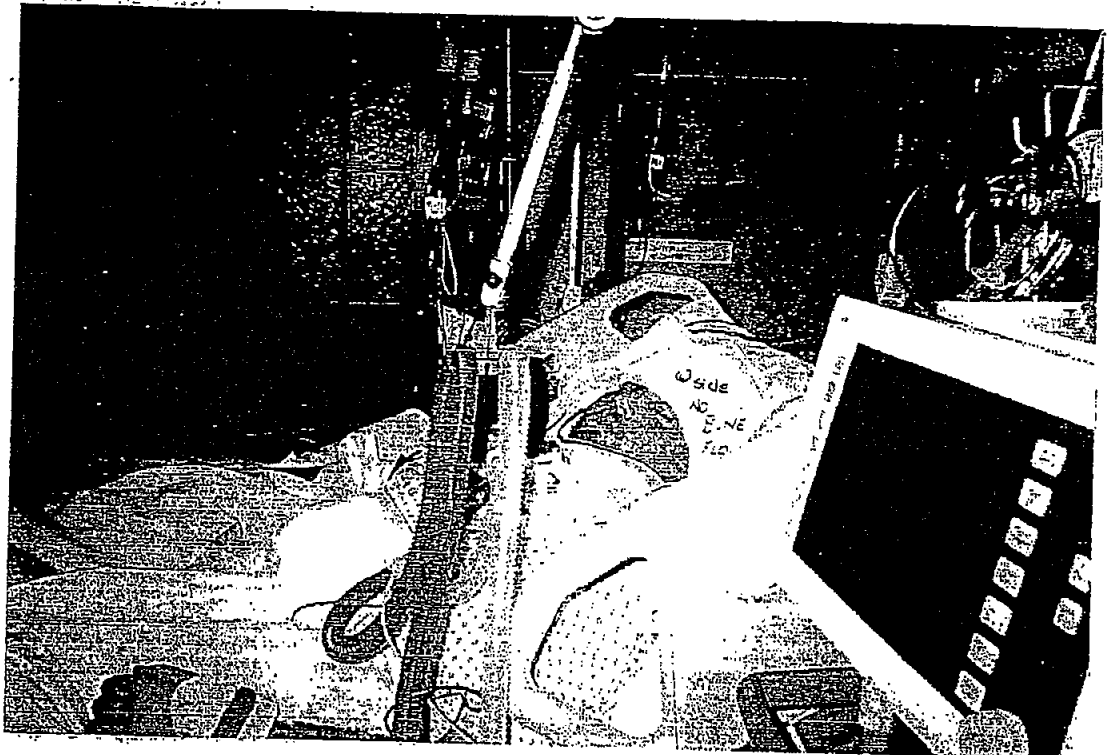


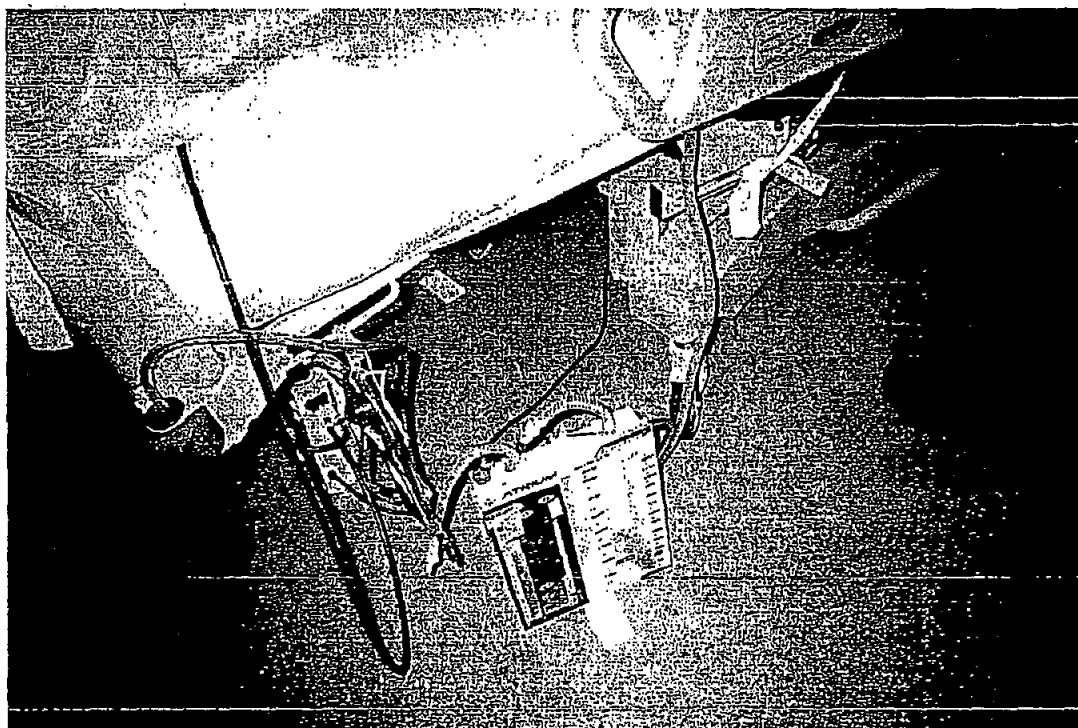
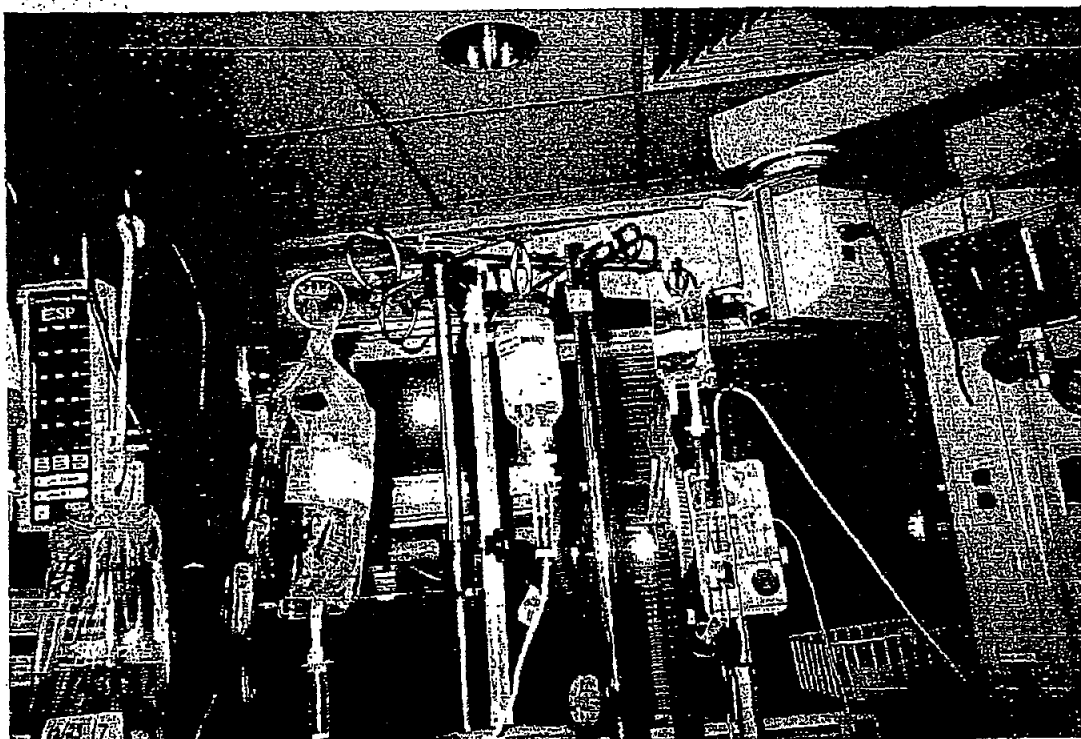


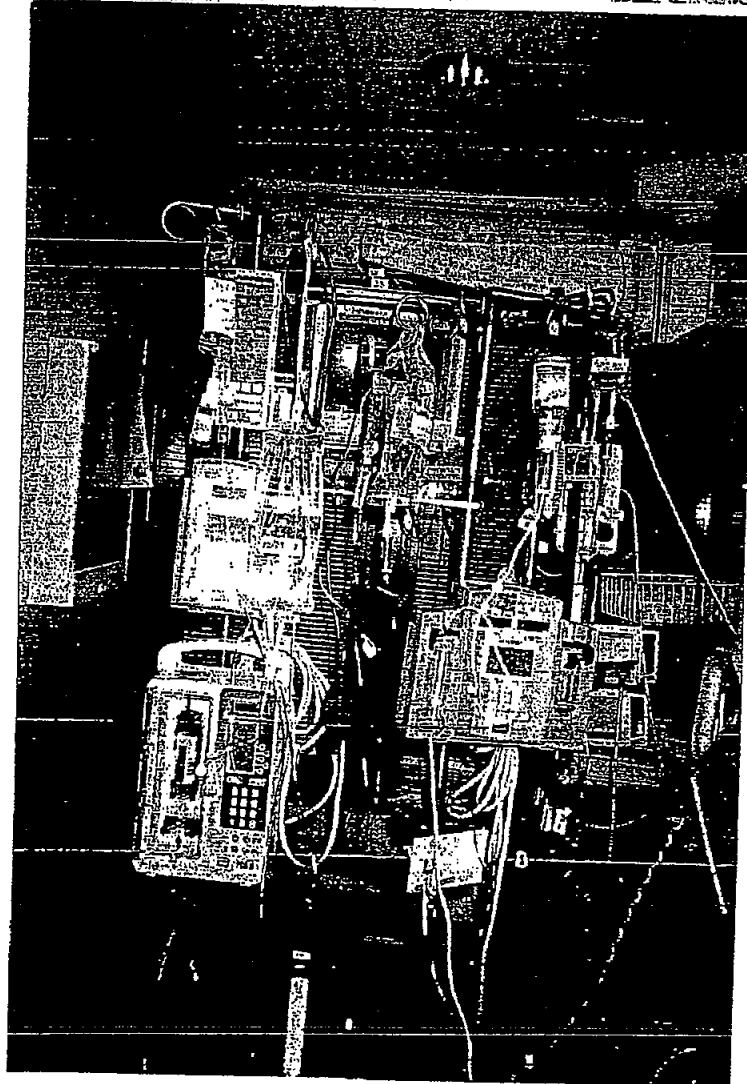
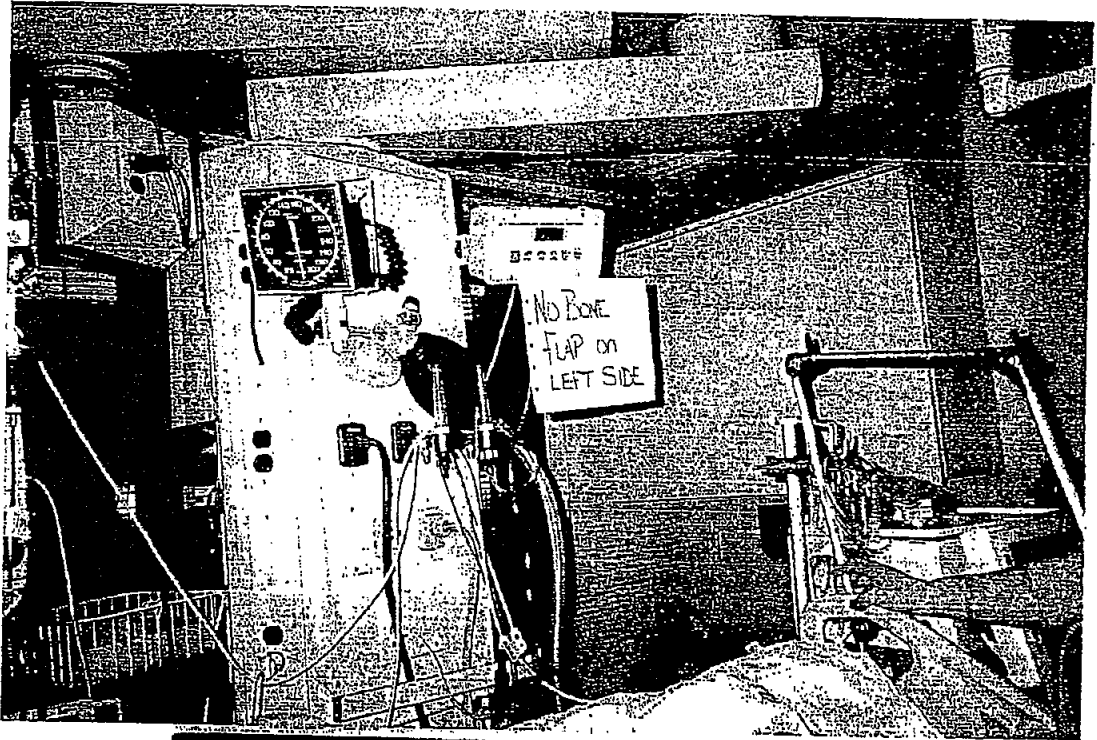


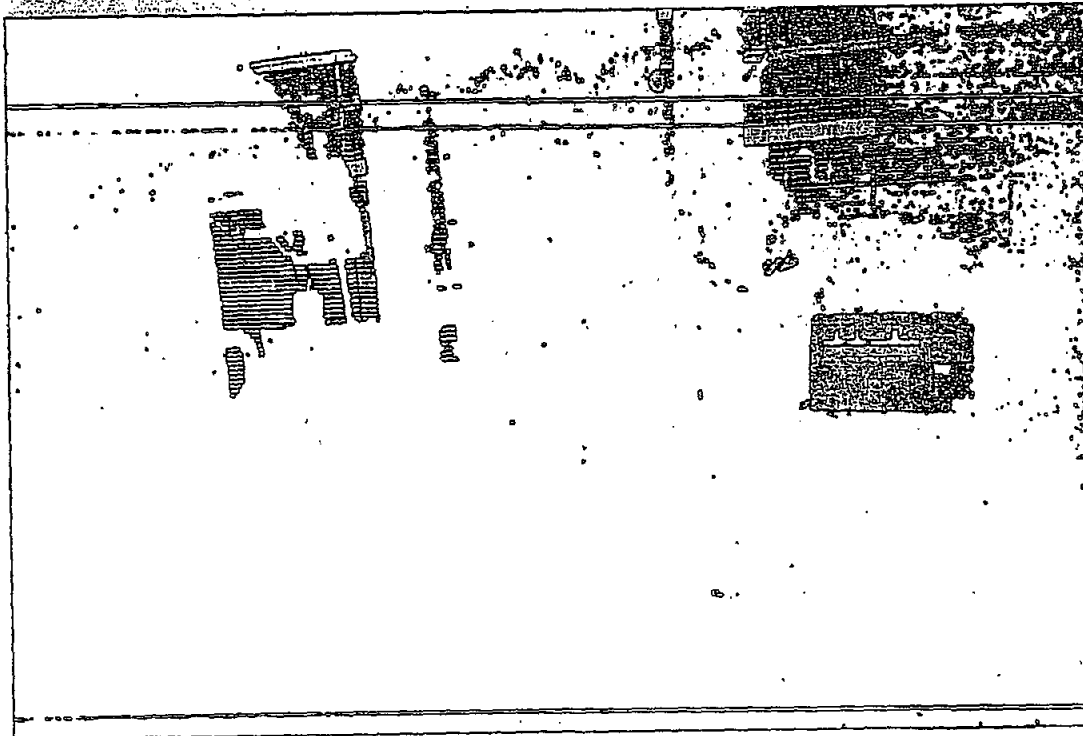
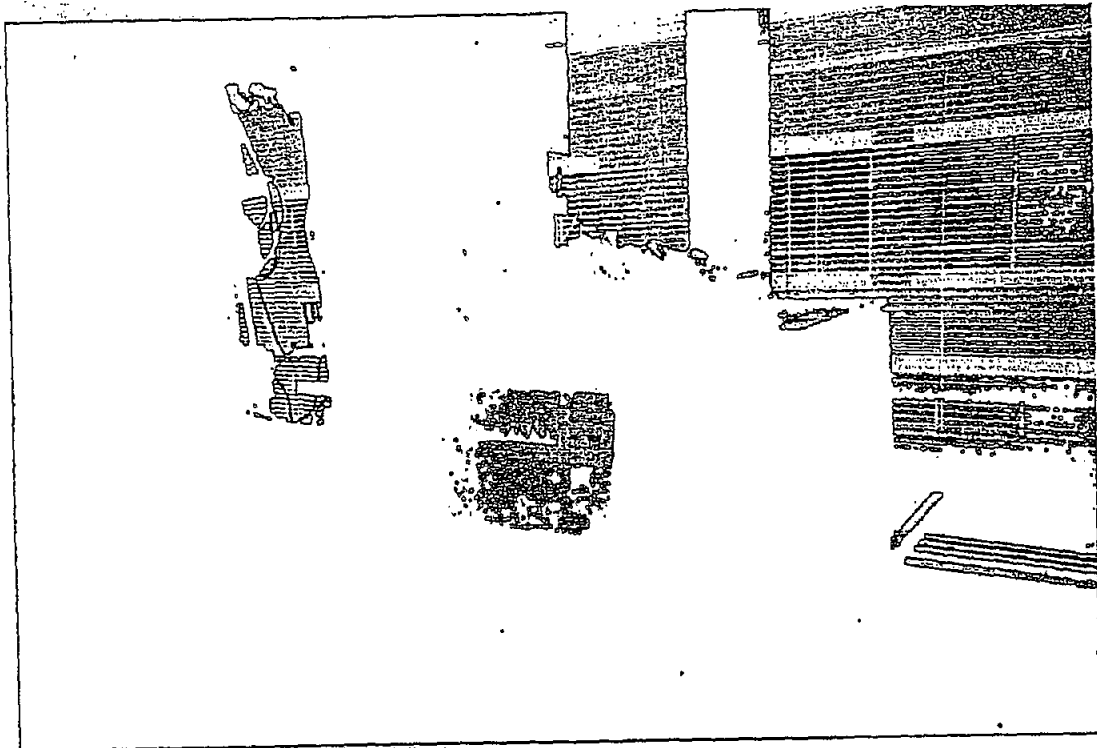












IN THE SUPERIOR COURT OF THE STATE OF DELAWARE
IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS,
INSURANCE COMPANY,
a foreign corporation,
Defendant.

* C.A. No.:
*
* NON-ARBITRATION CASE
*
* JURY TRIAL DEMANDED
*
*
*
*
* PLAINTIFF'S RESPONSE
* TO REQUEST FOR PRODUCTION
* OF DOCUMENTS PURSUANT TO
* CIVIL RULE 3(h)

COMES NOW, the Plaintiff, by and through his attorneys,
Schmittinger & Rodriguez, P.A. And hereby respond to production of
documents required by Rule 3 (h) as follows:

1. Plaintiff does maintain a claim for medical expenses
incurred as a result of the injuries at issue. The unpaid medical
bills currently in Plaintiff's possession which total \$642,037.31
will be provided to defense counsel without further request once
an entry of appearance is made.

SCHMITTINGER & RODRIGUEZ, P.A.

By: 

JEFFREY J. CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 South State Street
P.O. Box 497
Dover, Delaware 19903
(302) 674-0140
Attorney for Plaintiff

DATED: 7/27/06

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE
IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS
INSURANCE COMPANY,
a foreign corporation,

Defendant.

* C.A. No.:
*
* NON-ARBITRATION CASE
*
* JURY TRIAL DEMANDED
*
*
*
*
* PLAINTIFF'S RESPONSE TO
* REQUEST FOR PRODUCTION
* PURSUANT TO CIVIL RULE
* 16.1 (f) (1)

COMES NOW, the Plaintiffs, by and through their attorneys,
Schmittinger and Rodriguez, P.A., and hereby responds to
production of documents required by Rule 16.1 as follows;

1. Copies of all medical records in relation to the
accident currently in Plaintiff's possession will be provided to
defense counsel without further request once an entry of
appearance is made.

SCHMITTINGER & RODRIGUEZ, P.A.

By: 

JEFFREY J. CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 South State Street
P.O. Box 497
Dover, Delaware 19903
(302) 674-0140
Attorney for Plaintiff

DATED: 7/27/06

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,	*	C.A. No.:
by his Guardian Ad Litem,	*	
LAURIE KEISER,	*	NON-ARBITRATION CASE
	*	
Plaintiff,	*	
	*	JURY TRIAL DEMANDED
v.	*	
	*	
HARTFORD UNDERWRITERS	*	
INSURANCE COMPANY,	*	
a foreign corporation,	*	
	*	
Defendant.	*	

MOTION FOR APPOINTMENT OF GUARDIAN AD LITEM

COMES NOW, John W. Keiser, by and through his attorneys, Schmittinger and Rodriguez, P.A., and makes it known to this Court that the Plaintiff John W. Keiser is a mentally disabled adult of approximately 23 years of age and he does not have a duly appointed representative in this action. Laurie Keiser, as the natural mother of Plaintiff John W. Keiser, hereby moves the Court to be appointed as Guardian Ad Litem for the aforesaid disabled adult pursuant to Civil Rule 17(c) of this Court. In support thereof, Movant states as follows:

1. Plaintiff John W. Keiser was disabled in a car accident on December 18, 2005. "See Ex. A"

2. Pursuant to a Chancery Court Order dated March 4, 2005, Laurie Keiser was appointed guardian of his person. Ex. B"

3. As Plaintiff and his mother moved to South Carolina, his mother is in the process of closing the Delaware guardianship and opening a South Carolina guardianship.

4. As Plaintiff was rendered mentally disabled as a result of the collision, he will require a guardian ad litem to assist in prosecuting this matter.

SCHMITTINGER & RODRIGUEZ, P.A.

BY: 

JEFFREY J CLARK, ESQUIRE
Delaware Bar I.D. #3485
414 S. State Street
P.O. Box 497
Dover, Delaware 19903-0497
(302) 674-0140
Attorney for Plaintiff

Dated: 7/27/06
JJC:mj

Jan. 25. 2005 4:06PM

No. 6181 P. 4

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

IN AND FOR _____ COUNTY

IN THE MATTER OF:

John William Keiser

PHYSICIAN'S AFFIDAVIT

I, Fred Giberson, M.D., do hereby depose and say that:

1. I am a physician duly licensed to practice medicine in the State of Delaware.

2. The only relationship between the above-named person and myself is that of physician and patient.

3. I last examined the disabled person on the 26 day of January, 2005, and in my medical opinion (s)he needs a guardian of his/her person because by reason of mental incapacity and/or physical incapacity, (s)he is in danger of (circle one) [substantially endangering his (her) health] OR [becoming subject to abuse by other persons] OR [becoming the victim of designing persons].

4. The particulars of the alleged mental and/or physical incapacity are set forth in detail as follows:

Patient suffered severe traumatic brain injury on 12/18/05 after a motor vehicle accident. He suffered a subdural hematoma, a subarachnoid hemorrhage and diffuse axonal injury in addition to multiple orthopedic injuries. These injuries leave him incapacitated and unable to care for himself or manage his finances

Jan. 25. 2005 4:06PM

No. 6181 P. 5.

5. (Strike out inapplicable condition - a or b)

a. Personal service of legal papers upon this person WOULD NOT be detrimental to the person's health.

OR

~~b.~~ Personal service of legal papers upon this person WOULD be detrimental to the person's health for the following detailed reason(s): _____

6. (Strike out inapplicable condition - a or b)

~~a.~~ Personal service of legal papers upon this person WOULD NOT be meaningless.

OR

b. Personal service of legal papers upon this person WOULD be meaningless for the following detailed reasons:

He is incapable of comprehending them

11/26/05

Date

[Signature]
Physician

STATE OF DELAWARE

*
* SS:
*

COUNTY OF

ON THIS 26 day of January, 2005, before me, the Subscriber, a Notary Public for the State and County aforesaid, appeared Fredrick G. Gibson, a physician, known personally to me and being first duly sworn in accordance with law declared that the facts alleged in the foregoing petition are true and correct to the best of the affiant's knowledge and belief.

[Signature]

Notary Public

My Commission expires 10/17/05

IN THE CHANCERY COURT OF THE STATE OF DELAWARE
IN AND FOR KENT COUNTY

IN THE MATTER OF:
JOHN W. KEISER,
a disabled person.

*
*
*

C.M. No.: 2261-K

FINAL ORDER APPOINTING GUARDIAN FOR THE PROPERTY AND PERSON
OF AN ALLEGED DISABLED PERSON

RECEIVED FOR RECORD
2005 MAR -4 A.D. 10
REGISTER IN CIVIL
WILLIAM HUFNAGL

AND NOW, TO WIT, this 4th day of March, A.D., 2005, it appearing that the Petition for Appointment of Guardian of the Person and Property of John W. Keiser, a mentally and physically disabled person, hereinafter called "disabled person", having been presented and duly considered by the Court and the attorney ad litem, Adam Perza, Esquire, having been personally been served at least ten (10) days before the date of the hearing, and the next of kin of the alleged disabled person, Gregory Keiser, Sr., having signed a Waiver of Notice and Consent,

AND the Court having considered the Affidavits and statements made in Court, and being fully advised in the matter, and it appearing that John W. Keiser, is not a mentally ill person but is a disabled person because he is mentally and physically infirm and that by reason thereof he is unable to properly manage and care for his person and property and in consequence thereof is in danger of dissipating of losing such property, or becoming the victim of designing persons, and is without a Guardian to manage and care for his property, and he is in danger of substantially endangering his health or becoming subject to abuse by other persons, or becoming the victim of designing persons.

NOW THEREFORE, IT IS ORDERED THAT:

1. Laurie Keiser, be and hereby is, appointed Guardian of the person and property of the disabled person, first executing bond to be taken in the name of the State of Delaware, with a condition for the faithful performance of her duties as Guardian, in the penal sum of \$ 300,000 without surety.

2. The Guardian of the property shall open one or more interest bearing accounts at Wachovia Bank, and shall deposit all monies of the disabled person in said account(s). The account(s) shall be entitled "COURT OF CHANCERY, GUARDIANSHIP OF JOHN W. KEISER, LAURIE KEISER, GUARDIAN, WITHDRAWALS ONLY BY ORDER OF THE COURT." The Guardian shall not be required to open said account(s) unless and until the disabled person makes a recovery, either through settlement or trial, in the pending litigation regarding his injuries.

3. The Guardian is hereby granted leave to withdraw up to \$ 2000.00 per month without further notice of the Court. Otherwise, the Guardian may NOT make ANY withdrawals from the account(s) WITHOUT first having a Court Order to do so.

4. A first inventory is due within 30 days of receipt of funds, if any, by the Guardian from the disabled person's personal injury case.

5. The Guardian shall file an accounting of the Guardianship accounts at least once every year on the anniversary date of the appointment of the Guardian (the date of this Order) and at any other time the Court shall direct as required by the Rules of this Court.

6. The Guardian shall file a status report with the Register in Chancery every year on the anniversary date of the appointment of Guardian (the date of this Order) as required by the Rules of this Court and at any other time the Court shall direct. The status report shall include the current mailing address of both the disabled person and the Guardian, and the current medical statement from the attending physician setting forth the current medical status of the ward and addressing the need for a continued Guardianship.

7. Laurie Keiser, as Guardian of the property of John W. Keiser, a disabled person, subject to the limitations and standards of 12 Del. C. § 3302 relating to investment standards and powers of fiduciaries and the provisions of 12 Del. C. § 3304 relating to retention by a fiduciary of property of a ward delivered pursuant to Court Order, may retain any property of her ward now constituting part of her ward's estate and may acquire, invest, reinvest, exchange, retain, sell, and manage the property of her ward for the benefit of her ward, but may not expend or withdraw any property of her ward's estate without the Court's approval except for the extent permitted in paragraph 3 of this Order.

8. The Guardian, as Guardian of the person, shall not have the power to make decisions regarding the discontinuance of medical treatment, including but not limited to the discontinuance of artificial nutrition and hydration and/or life sustaining procedures, as those terms are defined by the Delaware Death With Dignity Act, 16 Del. C. §2501, et seq., without petitioning this

Court for express permission to make such decisions.

9. Upon qualification of the guardian of the property and receipt of necessary funds, the guardian shall pay the costs of these proceedings in the sum of \$114.00 to the Register in Chancery and pay ~~\$_____ to Noel E. Primos~~, Esquire, the attorney for Petitioner, for his services in preparation, filing and presenting the Petition, and pay \$980 to Adam Perza, Esquire, the attorney for the disabled person. The payment to Noel E. Primos, Esquire, shall be made upon receipt of funds from the disabled person's personal injury case.

10. The Register in Chancery of this Court is appointed as agent of the Guardian to accept service of process on behalf of the Guardian as to any claim arising out of the Guardianship if, by reason of the Guardian's absence from this State, she cannot be served.

11. The Guardian's attorney is responsible for the proper opening of any guardianship accounts and for the filing of the Proof of Compliance with the Register in Chancery within thirty (30) days from the date of the Guardian's receipt of funds, if any, from the disabled person's personal injury case.


~~VICE-CHANCELLER~~ Master

CERTIFIED
AS A TRUE COPY:
ATTEST:

REGISTER IN CHANCERY

By Lori B. Holland

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

IN AND FOR KENT COUNTY

JOHN W. KEISER,
by his Guardian Ad Litem,
LAURIE KEISER,

Plaintiff,

v.

HARTFORD UNDERWRITERS
INSURANCE COMPANY,
a foreign corporation,

Defendant.

* C.A. No.:
*
* NON-ARBITRATION CASE
*
* JURY TRIAL DEMANDED
*
*
*
*
*
*
*

ORDER

AND NOW, this _____ day of _____,
2006, the Court having considered the Motion of Laurie Keiser to
be appointed as the Guardian Ad Litem of the disabled adult
Plaintiff John W. Keiser; and

IT IS HEREBY ORDERED that for purposes of these proceedings,
Laurie Keiser is appointed Guardian Ad Litem of the disabled adult
Plaintiff John W. Keiser.

Judge

The JS-44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

I.(a) PLAINTIFFS

John W. Keiser
by his Guardian Ad Litem, Laurie Keiser

DEFENDANTS

Hartford Underwriters Insurance Company

(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF _____
(EXCEPT IN U.S. PLAINTIFF CASES)

New Castle

COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT _____
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED

(c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)

Jeffrey J. Clark, Esquire
Schmittinger & Rodriguez, P.A.
414 South State Street
P.O. Box 497
Dover, DE 19903
(302) 674-0140

ATTORNEYS (IF KNOWN)

William M. Kelleher, Esquire
Ballard Spahr Andrews & Ingersoll, LLP
919 N. Market Street, 12th Floor
Wilmington, DE 19801

II. BASIS OF JURISDICTION

(PLACE AN X IN ONE BOX ONLY)

- ☐ 1 U.S. Government Plaintiff ☐ 3 Federal Question (U.S. Government Not a Party)
- ☐ 2 U.S. Government Defendant ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES

(For Diversity Cases Only)

(PLACE AN X IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT)

- Citizen of This State ☐ 1 ☐ 1 DEF Incorporated or Principal Place of Business in This State ☐ 4 ☐ 4 DEF
- Citizen of Another State ☐ 2 ☐ 2 DEF Incorporated and Principal Place of Business in Another State ☐ 5 ☐ 5 DEF
- Citizen or Subject of a Foreign Country ☐ 3 ☐ 3 DEF Foreign Nation ☐ 6 ☐ 6 DEF

IV. NATURE OF SUIT

(PLACE AN X IN ONE BOX ONLY)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Over-payment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Over-payment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input checked="" type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury	PERSONAL INJURY <input type="checkbox"/> 362 Personal Injury - Med Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 610 Agriculture <input type="checkbox"/> 620 Other Food & Drug <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC <input type="checkbox"/> 630 Liquor Laws <input type="checkbox"/> 640 R.R. & Truck <input type="checkbox"/> 650 Airline Regs. <input type="checkbox"/> 660 Occupational Safety/Health <input type="checkbox"/> 690 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405)(g))
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 444 Welfare <input type="checkbox"/> 440 Other Civil Rights	PRISONER PETITIONS <input type="checkbox"/> 510 Motions to Vacate Sentence Habeas Corpus: <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition	<input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt. Relations <input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Emp. Ret. Inc. Security Act	<input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce/ICC Rates/etc. <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 810 Selective Service <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 875 Customer Challenge 12 USC 3410 <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 892 Economic Stabilization Act <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 894 Energy Allocation Act <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice <input type="checkbox"/> 950 Constitutionality of State Statutes <input type="checkbox"/> 890 Other Statutory Actions

V. ORIGIN

(PLACE AN X IN ONE BOX ONLY)

- ☐ 1 Original Proceeding ☒ 2 Removed from State Court ☐ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened ☐ 5 Transferred from another district (specify) ☐ 6 Multidistrict Litigation ☐ 7 Appeal to District Judge from Magistrate Judgment

VI. CAUSE OF ACTION

(CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE BRIEF STATEMENT OF CAUSE. DO NOT CITE JURISDICTIONAL STATUTES UNLESS DIVERSITY)

28 U.S.C. Section 1332(A)(1); Removal from state court pursuant to 28 U.S.C. Sections 1441, 1446

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23

DEMAND \$

Check YES only if demanded in complaint:
JURY DEMAND: ☐ Yes ☐ No

VIII. RELATED CASE(S) (See Instructions):

IF ANY

JUDGE

DOCKET NUMBER

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE

AO FORM 85 RECEIPT (REV. 9/04)

United States District Court for the District of Delaware

06 - 584

Civil Action No. _____

ACKNOWLEDGMENT
OF RECEIPT FOR AO FORM 85

NOTICE OF AVAILABILITY OF A
UNITED STATES MAGISTRATE JUDGE
TO EXERCISE JURISDICTION

2006 SEP 21 PM 1:19

U.S. DISTRICT COURT
DISTRICT OF DELAWARE

I HEREBY ACKNOWLEDGE RECEIPT OF 2 COPIES OF AO FORM 85.

9-21-06
(Date forms issued)

Dustin Frohlich
(Signature of Party or their Representative)

Dustin Frohlich
(Printed name of Party or their Representative)

Note: Completed receipt will be filed in the Civil Action